

**Section 1 Instructions:** Please complete all fields below for the provider

Entity Name (as written on W9):		Product Type: CHIP		CHIP Perinatal		
IPA name (if applicable):		DSNP		MMP		
Name Doing Business As (if applicable):		STAR		STAR+PLUS		
Billing Type: UB-04/Institutional	CMS-1500/Professional	W-9 TIN/EIN (nine characters):		Medicare ID:	State Medicaid ID:	
Level III Birthing Center: Y N	Primary Contact Name:		Primary Contact Email:		Primary Contact Phone:	
	Address Line 1	Address Line 2	City	State	ZIP + 4 Digits	Telephone (with Area Code)
<b>Pay to Address</b>						
<b>Recoveries Address</b> <i>Same as Pay To Address</i>						
Organization Website:						

**Section 2 Instructions:** Please complete each section below for all locations including applicable NPI or Atypical ID information.

Practice Location #	Facility Name <i>(as appearing in provider directory)</i>	Address Line 1	Address Line 2	City	State	ZIP + 4 Digits	County	Fax <i>(with Area Code)</i>	Telephone <i>(with Area Code)</i>
<b>1</b> <i>Main Location</i>									

**Regions(s):** Bexar   Dallas   El Paso   Harris   Jefferson   Northeast   Tarrant

**Facility NPI/Atypical ID:**

**Taxonomy Code:**

**CLIA ID:**

**Pediatric Services:** Y   N

**Languages Spoken:** English   Arabic   French  
Hindi   Korean   Spanish  
Tagalog   Urdu   West African  
Other (please list):

Practice Location 1 — Office Hours					
Day	No Set Hours			Start	End
Monday	Closed	Open 24 Hours	By Appointment Only		
Tuesday	Closed	Open 24 Hours	By Appointment Only		
Wednesday	Closed	Open 24 Hours	By Appointment Only		
Thursday	Closed	Open 24 Hours	By Appointment Only		
Friday	Closed	Open 24 Hours	By Appointment Only		
Saturday	Closed	Open 24 Hours	By Appointment Only		
Sunday	Closed	Open 24 Hours	By Appointment Only		



Practice Location #	Facility Name <i>(as appearing in provider directory)</i>	Address Line 1	Address Line 1	City	State	ZIP + 4 Digits	County	Fax <i>(with Area Code)</i>	Telephone <i>(with Area Code)</i>
2									

Regions(s): Bexar Dallas El Paso Harris Jefferson Northeast Tarrant

Facility NPI/Atypical ID:

Taxonomy Code:

CLIA ID:

Pediatric Services: Y N

Languages Spoken: English Arabic French  
Hindi Korean Spanish  
Tagalog Urdu West African  
Other (please list):

Practice Location 2 — Office Hours					
Day	No Set Hours			Start	End
Monday	Closed	Open 24 Hours	By Appointment Only		
Tuesday	Closed	Open 24 Hours	By Appointment Only		
Wednesday	Closed	Open 24 Hours	By Appointment Only		
Thursday	Closed	Open 24 Hours	By Appointment Only		
Friday	Closed	Open 24 Hours	By Appointment Only		
Saturday	Closed	Open 24 Hours	By Appointment Only		
Sunday	Closed	Open 24 Hours	By Appointment Only		

Practice Location #	Facility Name <i>(as appearing in provider directory)</i>	Address Line 1	Address Line 2	City	State	ZIP + 4 Digits	County	Fax <i>(with Area Code)</i>	Telephone <i>(with Area Code)</i>
3									

Regions(s): Bexar Dallas El Paso Harris Jefferson Northeast Tarrant

Facility NPI/Atypical ID:

Taxonomy Code:

CLIA ID:

Pediatric Services: Y N

Languages Spoken: English Arabic French  
Hindi Korean Spanish  
Tagalog Urdu West African  
Other (please list):

Practice Location 3 — Office Hours					
Day	No Set Hours			Start	End
Monday	Closed	Open 24 Hours	By Appointment Only		
Tuesday	Closed	Open 24 Hours	By Appointment Only		
Wednesday	Closed	Open 24 Hours	By Appointment Only		
Thursday	Closed	Open 24 Hours	By Appointment Only		
Friday	Closed	Open 24 Hours	By Appointment Only		
Saturday	Closed	Open 24 Hours	By Appointment Only		
Sunday	Closed	Open 24 Hours	By Appointment Only		



Practice Location #	Facility Name <i>(as appearing in provider directory)</i>	Address Line 1	Address Line 2	City	State	ZIP + 4 Digits	County	Fax <i>(with Area Code)</i>	Telephone <i>(with Area Code)</i>
4									

Regions(s): Bexar Dallas El Paso Harris Jefferson Northeast Tarrant

Facility NPI/Atypical ID:

Taxonomy Code:

CLIA ID:

Pediatric Services: Y N

Languages Spoken: English Arabic French  
Hindi Korean Spanish  
Tagalog Urdu West African  
Other (please list):

Practice Location 4 — Office Hours					
Day	No Set Hours			Start	End
Monday	Closed	Open 24 Hours	By Appointment Only		
Tuesday	Closed	Open 24 Hours	By Appointment Only		
Wednesday	Closed	Open 24 Hours	By Appointment Only		
Thursday	Closed	Open 24 Hours	By Appointment Only		
Friday	Closed	Open 24 Hours	By Appointment Only		
Saturday	Closed	Open 24 Hours	By Appointment Only		
Sunday	Closed	Open 24 Hours	By Appointment Only		

Practice Location #	Facility Name <i>(as appearing in provider directory)</i>	Address Line 1	Address Line 2	City	State	ZIP + 4 Digits	County	Fax <i>(with Area Code)</i>	Telephone <i>(with Area Code)</i>
5									

Regions(s): Bexar Dallas El Paso Harris Jefferson Northeast Tarrant

Facility NPI/Atypical ID:

Taxonomy Code:

CLIA ID:

Pediatric Services: Y N

Languages Spoken: English Arabic French  
Hindi Korean Spanish  
Tagalog Urdu West African  
Other (please list):

Practice Location 5 — Office Hours					
Day	No Set Hours			Start	End
Monday	Closed	Open 24 Hours	By Appointment Only		
Tuesday	Closed	Open 24 Hours	By Appointment Only		
Wednesday	Closed	Open 24 Hours	By Appointment Only		
Thursday	Closed	Open 24 Hours	By Appointment Only		
Friday	Closed	Open 24 Hours	By Appointment Only		
Saturday	Closed	Open 24 Hours	By Appointment Only		
Sunday	Closed	Open 24 Hours	By Appointment Only		



**Section 3 Instructions:** Please indicate ADA compliance for each location, as appropriate.

ADA Compliance	Group Locations					
Blind/ Visually Impaired (ADA5)	All	1	2	3	4	5
Cognitively Disabled (ADA6)	All	1	2	3	4	5
Deaf or Hard of Hearing (ADA7)	All	1	2	3	4	5
Examination Rooms - Compliant Access (ADA3)	All	1	2	3	4	5

ADA Compliance	Group Locations					
Handicap Accessible Medical Equipment (ADA4)	All	1	2	3	4	5
Rest Rooms - Compliant Access (ADA2)	All	1	2	3	4	5
Service Location - Compliant Access (ADA1)	All	1	2	3	4	5

**Section 4 instructions:** Please complete all fields below by selecting which service(s) are provided at each location and ages served.

**Habilitative and Rehabilitative Services**

Services	Locations					
Cardiac Rehabilitation	All	1	2	3	4	5
Physical Therapy	All	1	2	3	4	5

**Imaging**

Imaging Center	All	1	2	3	4	5
Mammography	All	1	2	3	4	5
Radiology Service Available	All	1	2	3	4	5
Ultrasound	All	1	2	3	4	5

**Home Health Services (Clinical)**

Home Health Care - Adult	All	1	2	3	4	5
Home Health Care - Pediatric	All	1	2	3	4	5
Home Infusion Services - Adult	All	1	2	3	4	5
Home Infusion Services - Pediatric	All	1	2	3	4	5

**Home Care Services (Non-Clinical)**

Services	Locations					
Home And Vehicle Modifications	All	1	2	3	4	5
Home Delivered Meals	All	1	2	3	4	5
Home Modification	All	1	2	3	4	5
Personal Care Services - Non-Skilled	All	1	2	3	4	5
Personal Care Services - Skilled	All	1	2	3	4	5
Personal Emergency Response System (PERS)	All	1	2	3	4	5
Respite Care – In Home	All	1	2	3	4	5
Respite Care - Institutional	All	1	2	3	4	5

**Medical Therapies**

Chemotherapy	All	1	2	3	4	5
Hemodialysis	All	1	2	3	4	5
IV Outpatient Services	All	1	2	3	4	5
Peritoneal Dialysis	All	1	2	3	4	5



**Transplants**

Services	Locations					
Transplant - Heart	All	1	2	3	4	5
Transplant - Intestinal	All	1	2	3	4	5
Transplant - Kidney	All	1	2	3	4	5
Transplant - Liver	All	1	2	3	4	5
Transplant - Lung	All	1	2	3	4	5
Transplant - Pancreas	All	1	2	3	4	5

**Transportation**

Ambulance Services	All	1	2	3	4	5
Non-Emergency Medical Transportation	All	1	2	3	4	5

**Sleep Testing**

In Center Sleep Testing	All	1	2	3	4	5
In Home Sleep Testing	All	1	2	3	4	5

**Teleservices**

Telehealth (Behavioral Health/Psych)	All	1	2	3	4	5
Telemedicine (Medical)	All	1	2	3	4	5
Telemonitoring (Hospital, Hospice, Home Health Agency, etc)	All	1	2	3	4	5

Please add any unlisted services below and indicate age range and location.

Unlisted Services	Locations					
	All	1	2	3	4	5
	All	1	2	3	4	5
	All	1	2	3	4	5
	All	1	2	3	4	5

**Miscellaneous Services**

Service	Locations					
Durable Medical Equipment	All	1	2	3	4	5
Family Planning Services	All	1	2	3	4	5
Laboratory Services Available	All	1	2	3	4	5
Nutritional Counseling	All	1	2	3	4	5
Orthotics and Prosthetics	All	1	2	3	4	5
School Based Clinic	All	1	2	3	4	5
Care Management Services	All	1	2	3	4	5

**Community First Choice (CFC) Program**

Emergency Response Services	All	1	2	3	4	5
Habilitation Services	All	1	2	3	4	5
Personal Assistance Services	All	1	2	3	4	5
Support Management	All	1	2	3	4	5

Unlisted Services	Locations					
	All	1	2	3	4	5
	All	1	2	3	4	5
	All	1	2	3	4	5
	All	1	2	3	4	5