
BCMS MEMBER INFORMATION UPDATE

The BCMS Physician Referral Service is a free community benefit that matches patients with physicians. The "Find a Doctor" physician referral service on the BCMS website (www.bcms.org) offers patients a searchable database that includes the names of member physicians and important information including specialties, accepting new patients, types of insurance accepted, special procedures, languages spoken, etc.

Your practice information and photo is also included, not only on the "Find a Doctor" referral service but also in the BCMS Physician & Medical Directory publication and the DocBookMD smart phone application. Please update your information and if you have not submitted a current photo in the last couple of years, please email it to membership@bcms.org (preferably color). If you have any questions or need assistance call (210) 301-4398.

Physician Name: _____

Primary Specialty: _____

Secondary Specialty: _____

Texas Medical License #: _____

Spouse Name: _____

Preferred E-mail Address: _____

Website Address: _____

Office 1 Company/Group Name _____

Office 1 Address _____

Office 1 City, State Zip _____

Office 1 Phone _____

Office 1 Fax _____

Name of Office 1 Manager _____

Office 1 Manager Phone _____

Office 1 Manager Email _____

Physician Identifiers

NPI # _____

TPI # _____

Medicare # _____

UPIN # _____

Company/Group 1 Identifiers

Group NPI # _____

Group TPI # _____

Group Medicare # _____

Are you accepting NEW Medicare patients?

Yes No

Are you accepting NEW Medicaid patients?

Yes No

Are you accepting NEW patients with Major Health Plans?

Yes No

Are you accepting NEW patients that will pay Cash?

Yes No

Does the physician or office staff speak any other languages other than English:

Spanish Chinese French

Hindi Italian Japanese

Thai Vietnamese

Other _____

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Yes No

2nd Office/Group Name _____

2nd Office Address _____

2nd Office City, State Zip _____

Office 2 Phone _____

Office 2 Fax _____

Name of Office 2 Manager _____

Office 2 Manager Phone _____