



**TEXAS**  
Health and Human  
Services

## **Community Living Assistance and Support Services (CLASS) Selection Determination**

### **Beaumont**

Catchment Area

I, \_\_\_\_\_,  
(Print Applicant's Name) (Area Code and Telephone No.)

**choose the following as my CLASS provider agencies:**

1. Choose one Case Management Agency (CMA)
2. Choose one Direct Services Agency (DSA)

### **Case Management Agencies (CMA)**

☐ **Caso Case Management Services, Inc.**

**Contract No.:** 4100020

**Provider No.:** 1032956

**Telephone:** ( 713) 870-7099

**Alt. Telephone:**

☐ **Client Support Services, Inc.**

**Contract No.:** 1015828

**Provider No.:**

**Telephone:** ( 409) 835-2791

**Alt. Telephone:**

☐ **Peppertree Complete Care, LLC**

**Contract No.:** 1016627

**Provider No.:**

**Telephone:** ( 877) 287-5215

**Alt. Telephone:**

☐ **Perrylee Home Health Care Services, Inc.**

**Contract No.:** 1015823

**Provider No.:**

**Telephone:** ( 409) 813-2211

**Alt. Telephone:**

☐ **Segnik Group, Inc.**

**Contract No.:** 1027716

**Provider No.:**

**Telephone:** ( 713) 484-8699

**Alt. Telephone:**

### **Direct Services Agencies (DSA)**

☐ **Disability Services of the Southwest, Inc.**

**Contract No.:** 1025770

**Provider No.:**

**Telephone:** ( 409) 813-2527

**Alt. Telephone:**

☐ Educare Community Living Corporation-Texas

Contract No.: 1015923

Provider No.:

Telephone: ( 409) 842-0779

Alt. Telephone: (409) 356-9723

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(Signature of Participant or Legally Authorized Representative)

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(Date)