

# Primary Care Physician Selection Form

To receive services from Physicians Plus under your BadgerCare Plus Plan, you and any covered family members must choose a primary care physician (PCP). Please choose from the doctors listed in your Physicians Plus Provider Directory, then complete the information below. (Each covered member can choose a different PCP if they wish.)

**Remember, all members covered by a Physicians Plus BadgerCare Plus Plan must select a network PCP to receive benefits.**

Name	Date of Birth (mo/day/yr)	ForwardHealth ID Number	Primary Care Physician (PCP)	Provider ID Number
Member 1				
Member 2				
Member 3				
Member 4				
Member 5				
Member 6				
Member 7				

If you have any questions, please call Member Service at  
1-800-545-5015 or 608-282-8900.

No postage necessary.  
Please fold, seal and mail to Physicians Plus as soon as possible.



Physicians Plus Insurance Corp.  
PO Box 269001  
Plano, TX 75026-9001

Postage will be paid by addressee

**BRP Info**

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**Thank you for completing this form.**

