Town & Country Physician "In-Network" Request Form



Submit Request Form to:



Email: info@samerahealth.com

Fax: (435) 563-4035

Date of Request:	Employer:
Employee Name:	Employee Phone:
Employee Email:	
Before completing and submitting this provider recto contract with any provider currently contracted,	quest form, I do understand Town & Country is unable or affiliated with the following organizations:
 University of Utah Hospital, Clinics, and P HCA – Mountain Star Healthcare Hospital Steward – IASIS Hospitals, Clinics and Phy 	s, Clinics, and Physicians
I request the provider listed below be contacted fo	r possible participation with Town & Country:
Provider Name:	Provider Specialty:
Provider Phone:	Provider Address:
Provider City:	Provider State:
Provider Clinic Name:	
Patient's Name (if different than Employee):	
Please confirm if the Employee/Depender	nt is currently seeing the requested provider:
Please Check: Yes No	
Next Scheduled Appointment:	

As a reminder, members should access the Intermountain Healthcare hospitals to receive in-network benefits in Utah. Submitting this request does not guarantee the Provider will be contracted with Town & Country. Contracted agreements may take a minimum of 60 days to complete. Check provider status on the Samera Health website or contact Samera Health to verify status of request.