

November 17, 2025

REQUEST FOR MEDICAL RECORDS

Dear Provider:

Community Health Choice (Community) works closely with all state and regulatory agencies to meet required deliverables in a timely manner. At times, Community will receive requests that include the need for medical records. Community will closely partner with our provider network to obtain such records. When receiving a request for medical records, Community asks that our providers return the records as quickly as possible.

Providers have a contractual obligation to provide medical records when requested. If you have received a request for medical records, please submit the records to your Provider Performance Manager (PPM), to our email at ProviderRelationsInquiries@Communityhealthchoice.org, or through secure fax at (713)295-7039. The submission of these records will support Community Health Choice Inc. (Community) with its operational responsibility of oversight of participating partners and adherence to Texas Administrative Code, Title 1, Part 15, Chapter 353, Subchapter E, Rule §353.417. We thank you in advance for your cooperation.

Community Health Choice Inc. (Community) is a Covered Entity as defined by HIPAA and all past and current members are provided with a HIPAA Privacy Notice upon enrollment therefore Protected Health Information (PHI) may be released to a Covered Entity without a release from the member/patient for treatment, payment or health care operations, under the Health Insurance Portability and Accountability Act (HIPAA). Questions pertaining to medical records can be directed to your PPM or sent to ProviderRelationsInquiries@Communityhealthchoice.org.

We thank you for your cooperation and prompt attention to this matter.

Sincerely,

Darrin Johnson

Darrin Johnson
Chief Operating Officer