



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

Valley

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 Services Agency (CMA)
2. Choose one Direct Services Agency (DSA)

CMA

Agency	Telephone	Contract Number
EduCare Living Corporation	956-668-1080 956-428-0371	1015925
Lifetime Living, Inc.	956-687-8463	1017411
Valley Association for Independent Living, Inc.	956-668-8245	1015854

DSA

Agency	Telephone	Contract Number
Agua Cristalina Home Care, LLC	956-793-4191	1025608
All Generations Health Care Systems, Inc. d/b/a All Generations Health Care Systems, Inc.	956-928-1001	1015843
Amable Home Care, LLC	956-509-5801 956-277-0351	1026851
Dulce Esperanza Home Health Care, LLC	956-580-2119	1017750
First Primary Home Care, Inc. d/b/a Bee First Primary Home Care	956-412-5988 888-224-9897	1016426
Hub City Home Health, Inc.	956-567-0421	1031088
M & R Management, LLC d/b/a Morning Glory Provider Services	956-725-5808	1021309

Agency	Telephone	Contract Number
Nurses That Care Sitter Services, Inc.	956-668-0029	1018663
Presidente Home Care, Inc.	956-687-6760	1027930
Stepping Stones Home Care Services, Ltd.	956-661-9400	1017665
Texas Visiting Nurse Service, LTD.	956-412-1401	1015939

(Signature of Participant or Legally Authorized Representative)

(Date)