

HIDALGO COUNTY BUDGET OFFICE/EMPLOYEE BENEFITS DIVISION  
CERTIFICATION OF MEDICAL INSURANCE CLAIMS  
PAID BY BLUE CROSS BLUE SHIELD OF TEXAS  
FOR THE PERIOD OF: October 23, 2010 thru November 12, 2010.

Hidalgo County's Self-Funded Health Insurance, Third Party Administrator (TPA) BLUE CROSS BLUE SHIELD OF TEXAS, has submitted to my office a request to reimburse the County's CLAIMS PAYING ACCOUNT in the amount of \$ 700,767.87

- 1). Hidalgo County
- 2). Hidalgo County Headstart Program
- 3). Community Service Agency
- 4). Hidalgo County Urban County Program
- 5). Drainage District #1
- 6). Appraisal District

Total Reimbursement Requested by Blue Cross Blue Shield of Texas for dates 10/23/2010 to 11/12/2010 is \$ 700,767.87.

Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of November 22, 2010.

I hereby approve this reimbursement and certify that I and/or my staff have reviewed each claim included on the attached check register and to the best of my knowledge ensure:

- All the claimants are in fact employees of Hidalgo County, Drainage District No. 1, Hidalgo County Headstart Program, Community Service Agency, or Hidalgo County Urban Program and Hidalgo County Appraisal District.
- All fees to vendors are appropriate for the type of service provided.
- All insurance premiums paid to Hidalgo County for Health Insurance Self-Funded Account were received by my department and deposited to the Hidalgo County Treasurer's Office and credited to the corresponding salary account.
- All types of expenditures reflected on this claim report are appropriate for the Hidalgo County Health Insurance Self-Funded Account.

Debra Vazquez  
Employee Benefits Manager

11/16/2010  
Date

\_\_\_\_\_  
Dept. of Budget & Management Budget Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Commissioner's Court Approval

\_\_\_\_\_  
Date



**BlueCross BlueShield  
of Texas**

**Group # 021185**

**HIDALGO COUNTY**

**Settlement ID:**

**TX433010006**

**Processed Date**

**Period**

**10/23/2010 to 10/29/2010**

SECTION	
0001-0011	HIDALGO COUNTY \$ 163,398.91
0002-0012	HEADSTART \$ 58,875.26
0003-0013	APPRAISAL DISTRICT \$ 15,275.36
0004-0014	COMMUNITY SERVICE \$ 1,143.25
0005-0015	DRAINAGE DISTRICT \$ 2,755.69
9001-9002	COBRA \$ 11,018.91
0006-0016	RETIREE \$ 3,165.56
<b>TOTALS</b>	
<b>\$255,632.94</b>	



**Blue Cross BlueShield  
of Texas**

**Group # 021185**

**HIDALGO COUNTY**

**Settlement ID:**

**TX433010006**

**Processed Date**

**Period**

11/01/2010 to 11/05/2010

SECTION	
0001-0011	HIDALGO COUNTY \$ 160,144.48
0002-0012	HEADSTART \$ 54,647.99
0003-0013	APPRAISAL DISTRICT \$ 15,589.28
0004-0014	COMMUNITY SERVICE \$ 788.80
0005-0015	DRAINAGE DISTRICT \$ 2,454.34
9001-9002	COBRA \$ 18,558.57
0006-0016	RETIREE \$ 3,059.24
STOP LOSS CREDIT	(\$83,083.10)

**TOTALS**

**\$172,159.60**



**BlueCross BlueShield  
of Texas**

**Group # 021185      HIDALGO COUNTY**

**Settlement ID:      TX433010006**

**Processed Date      11/06/2010 to 11/12/2010**  
Period

SECTION	
0001-0011	HIDALGO COUNTY      \$ 209,547.84
0002-0012	HEADSTART      \$ 40,209.36
0003-0013	APPRAISAL DISTRICT      \$ 6,036.52
0004-0014	COMMUNITY SERVICE      \$ 743.59
0005-0015	DRAINAGE DISTRICT      \$ 4,752.84
9001-9002	COBRA      \$ 7,826.30
0006-0016	RETIREE      \$ 3,858.88
STOP LOSS CREDIT	

**TOTALS**

**\$272,975.33**

**Invoices - Invoice Details**

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 11/01/2010 - 11/05/2010 Process Date: 11/05/2010

**Invoice Detail**

Invoice Detail summarizes claims activity by association.

**Claim Period:** 11/01/2010 - 11/05/2010

Cust Nbr	Set Nbr	ASC Nbr	Association Name	Total Claims Month To Date	Total Claims Week To Date	Drug Claims	Dental Claims	All Claims But Drug, Dental	Claim Count
TX433	01	001	HIDALGO COUNTY	\$160,144.48	\$160,144.48	\$37,224.13	\$0.00	\$122,920.35	2,458
TX433	01	002	HEAD START	\$54,647.99	\$54,647.99	\$6,036.81	\$0.00	\$48,611.18	525
TX433	01	003	APPRAISAL DISTRICT	\$15,589.28	\$15,589.28	\$7,043.63	\$0.00	\$8,545.65	107
TX433	01	004	COMMUNITY SERVICE	\$788.80	\$788.80	\$391.59	\$0.00	\$397.21	19
TX433	01	005	DRAINAGE DISTRICT	\$2,454.34	\$2,454.34	\$1,154.92	\$0.00	\$1,299.42	53
TX433	01	006	RETIREEES	\$3,059.24	\$3,059.24	\$2,245.16	\$0.00	\$814.08	45
TX433	01	007	COBRA	\$18,558.57	\$18,558.57	\$1,936.19	\$0.00	\$16,622.38	69
			STOPLOSS	(\$83,083.10)	(\$83,083.10)	\$0.00	\$0.00	\$0.00	0
			<b>Customer Total Claims</b>	\$255,242.70	\$255,242.70	\$56,032.43	\$0.00	\$199,210.27	3,276
			<b>STOPLOSS Total</b>	(\$83,083.10)	(\$83,083.10)	\$0.00	\$0.00	\$0.00	0
			<b>Customer Grand Total</b>	\$172,159.60	\$172,159.60	\$56,032.43	\$0.00	\$199,210.27	3,276

**Invoices - Invoice Details**

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 10/23/2010 - 10/29/2010 Process Date: 10/29/2010

**Invoice Detail**

Invoice Detail summarizes claims activity by association.

**Claim Period:** 10/23/2010 - 10/29/2010

Cust Nbr	Set Nbr	ASC Nbr	Association Name	Total Claims Month To Date	Total Claims Week To Date	Drug Claims	Dental Claims	All Claims But Drug, Dental	Claim Count
TX433	01	001	HIDALGO COUNTY	\$848,759.45	\$163,398.91	\$43,326.81	\$0.00	\$120,072.10	2,528
TX433	01	002	HEAD START	\$191,252.91	\$58,875.26	\$9,618.43	\$0.00	\$49,256.83	702
TX433	01	003	APPRAISAL DISTRICT	\$44,201.45	\$15,275.36	\$1,561.56	\$0.00	\$13,713.80	78
TX433	01	004	COMMUNITY SERVICE	\$7,650.14	\$1,143.25	\$431.67	\$0.00	\$711.58	30
TX433	01	005	DRAINAGE DISTRICT	\$19,210.99	\$2,755.69	\$830.83	\$0.00	\$1,924.86	50
TX433	01	006	RETIREEES	\$28,378.51	\$3,165.56	\$2,145.46	\$0.00	\$1,020.10	51
TX433	01	007	COBRA	\$55,351.56	\$11,018.91	\$199.66	\$0.00	\$10,819.25	92
			STOPLOSS	(\$72,834.75)	\$0.00	\$0.00	\$0.00	\$0.00	0
			<b>Customer Total Claims</b>	\$1,194,805.01	\$255,632.94	\$58,114.42	\$0.00	\$197,518.52	3,531
			<b>STOPLOSS Total</b>	(\$72,834.75)	\$0.00	\$0.00	\$0.00	\$0.00	0
			<b>Customer Grand Total</b>	\$1,121,970.26	\$255,632.94	\$58,114.42	\$0.00	\$197,518.52	3,531

**Invoices - Invoice Details**

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 11/06/2010 - 11/12/2010 Process Date: 11/12/2010

Invoice Detail

Invoice Detail summarizes claims activity by association.

**Claim Period:** 11/06/2010 - 11/12/2010

Cust Nbr	Set Nbr	ASC Nbr	Association Name	Total Claims Month To Date	Total Claims Week To Date	Drug Claims	Dental Claims	All Claims But Drug, Dental	Claim Count
TX433	01	001	HIDALGO COUNTY	\$369,692.32	\$209,547.84	\$37,532.31	\$0.00	\$172,015.53	2,068
TX433	01	002	HEAD START	\$94,857.35	\$40,209.36	\$11,168.93	\$0.00	\$29,040.43	528
TX433	01	003	APPRAISAL DISTRICT	\$21,625.80	\$6,036.52	\$2,087.81	\$0.00	\$3,948.71	106
TX433	01	004	COMMUNITY SERVICE	\$1,532.39	\$743.59	\$183.02	\$0.00	\$560.57	31
TX433	01	005	DRAINAGE DISTRICT	\$7,207.18	\$4,752.84	\$1,273.02	\$0.00	\$3,479.82	79
TX433	01	006	RETIREEES	\$6,918.12	\$3,858.88	\$2,821.24	\$0.00	\$1,037.64	52
TX433	01	007	COBRA	\$26,384.87	\$7,826.30	\$1,828.92	\$0.00	\$5,997.38	59
			STOPLOSS	(\$83,083.10)	\$0.00	\$0.00	\$0.00	\$0.00	0
			<b>Customer Total Claims</b>	\$528,218.03	\$272,975.33	\$56,895.25	\$0.00	\$216,080.08	2,923
			<b>STOPLOSS Total</b>	(\$83,083.10)	\$0.00	\$0.00	\$0.00	\$0.00	0
			<b>Customer Grand Total</b>	\$445,134.93	\$272,975.33	\$56,895.25	\$0.00	\$216,080.08	2,923