

HIDALGO COUNTY BUDGET OFFICE/WORKERS' COMPENSATION DIVISION
CERTIFICATION OF MEDICAL INSURANCE CLAIMS
PAID BY BLUE CROSS BLUE SHIELD OF TEXAS

FOR THE PERIOD OF November 27, 2010 thru December 10, 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 556,699.19.

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

Total Reimbursement Requested by Blue Cross Blue Shield of Texas for dates 11/27/2010 to 12/10/2010 is \$ 556,699.19.

Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of December 21, 2010.

I hereby approve this reimbursement and 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, Hidalgo County Community Service Agency, 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.



Employee Benefits Manager

12/10/2010

Date

Dept. of Budget & Management Budget Officer

Date

Commissioner's Court Approval

Date

Invoices - Invoice Details

Invoice ID: TX433010006 - HIDALGO COUNTY
 Invoice Period: 11/27/2010 - 12/03/2010 Process Date: 12/03/2010

Invoice Detail

Invoice Detail summarizes claims activity by association.

Claim Period: 11/27/2010 - 11/30/2010

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	\$837,402.20	\$48,729.09	\$0.00	\$0.00	\$48,729.09	902
TX433	01	002	HEAD START	\$205,660.13	\$28,033.82	\$0.00	\$0.00	\$28,033.82	261
TX433	01	003	APPRAISAL DISTRICT	\$43,804.19	\$2,884.97	\$0.00	\$0.00	\$2,884.97	20
TX433	01	004	COMMUNITY SERVICE	\$4,657.35	\$605.85	\$0.00	\$0.00	\$605.85	32
TX433	01	005	DRAINAGE DISTRICT	\$19,640.88	\$1,388.08	\$0.00	\$0.00	\$1,388.08	44
TX433	01	006	RETIREEES	\$17,902.46	\$1,002.74	\$0.00	\$0.00	\$1,002.74	22
TX433	01	007	COBRA	\$45,440.30	\$6,261.94	\$0.00	\$0.00	\$6,261.94	49
			STOPLOSS	(\$83,083.10)	\$0.00	\$0.00	\$0.00	\$0.00	0
			Customer Total Claims	\$1,174,507.51	\$88,906.49	\$0.00	\$0.00	\$88,906.49	1,330
			STOPLOSS Total	(\$83,083.10)	\$0.00	\$0.00	\$0.00	\$0.00	0
			Customer Grand Total	\$1,091,424.41	\$88,906.49	\$0.00	\$0.00	\$88,906.49	1,330

Invoices - Invoice Details

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 11/27/2010 - 12/03/2010 Process Date: 12/03/2010

Invoice Detail

Invoice Detail summarizes claims activity by association.

Claim Period: 12/01/2010 - 12/03/2010

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	\$131,231.88	\$131,231.88	\$36,170.55	\$0.00	\$95,061.33	1,675
TX433	01	002	HEAD START	\$35,340.10	\$35,340.10	\$9,197.62	\$0.00	\$26,142.48	467
TX433	01	003	APPRAISAL DISTRICT	\$8,975.71	\$8,975.71	\$5,869.59	\$0.00	\$3,106.12	116
TX433	01	004	COMMUNITY SERVICE	\$1,322.29	\$1,322.29	\$427.27	\$0.00	\$895.02	12
TX433	01	005	DRAINAGE DISTRICT	\$1,384.55	\$1,384.55	\$287.77	\$0.00	\$1,096.78	64
TX433	01	006	RETIREES	\$3,493.74	\$3,493.74	\$1,798.68	\$0.00	\$1,695.06	40
TX433	01	007	COBRA	\$32,019.91	\$32,019.91	\$1,053.15	\$0.00	\$30,966.76	39
			Customer Total Claims	\$213,768.18	\$213,768.18	\$54,804.63	\$0.00	\$158,963.55	2,413
			Customer Grand Total	\$213,768.18	\$213,768.18	\$54,804.63	\$0.00	\$158,963.55	2,413

Invoices - Invoice Details

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 12/04/2010 - 12/10/2010 Process Date: 12/10/2010

Invoice Detail

Invoice Detail summarizes claims activity by association.

Claim Period: 12/04/2010 - 12/10/2010

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	\$364,047.12	\$232,815.24	\$43,417.00	\$0.00	\$189,398.24	2,392
TX433	01	002	HEAD START	\$74,906.45	\$39,566.35	\$6,086.06	\$0.00	\$33,480.29	566
TX433	01	003	APPRAISAL DISTRICT	\$19,371.47	\$10,395.76	\$3,242.79	\$0.00	\$7,152.97	110
TX433	01	004	COMMUNITY SERVICE	\$2,176.60	\$854.31	\$117.37	\$0.00	\$736.94	35
TX433	01	005	DRAINAGE DISTRICT	\$3,584.60	\$2,200.05	\$955.64	\$0.00	\$1,244.41	38
TX433	01	006	RETIREEES	\$27,878.10	\$24,384.36	\$2,971.27	\$0.00	\$21,413.09	70
TX433	01	007	COBRA	\$41,448.35	\$9,428.44	\$1,253.96	\$0.00	\$8,174.48	68
			STOPLOSS	(\$65,619.99)	(\$65,619.99)	\$0.00	\$0.00	\$0.00	0
			Customer Total Claims	\$533,412.69	\$319,644.51	\$58,044.09	\$0.00	\$261,600.42	3,279
			STOPLOSS Total	(\$65,619.99)	(\$65,619.99)	\$0.00	\$0.00	\$0.00	0
			Customer Grand Total	\$467,792.70	\$254,024.52	\$58,044.09	\$0.00	\$261,600.42	3,279