

**Mike Escaname**

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**From:** Josephine L. Ramirez <josephine.ramirez@da.co.hidalgo.tx.us>  
**Sent:** Wednesday, June 20, 2012 2:49 PM  
**To:** 'Mike Escaname'  
**Cc:** eddie.olivarez@hchd.org; lydia.serna@hchd.org; 'Connie Sanchez'  
**Subject:** RE: BCBSTX GROUP AGREEMENT: HIDALGO COUNTY HEALTH DEPARTMENT - Request for Review

Mike,

I have reviewed the agreements. At the outset, they both identify the Hidalgo County Health Department as a professional entity which is not correct. I would suggest revising this language to indentify the HCHD as a governmental entity. Otherwise, I approve as to the form of the agreements.

**Josephine Ramirez Solis**  
*Assistant Criminal District Attorney*  
County Affairs Section  
**Office of Criminal District Attorney**  
Hidalgo County, Texas  
100 N Closner Rm 303  
Edinburg, TX 78539  
(956) 318-2313 ext. 3823  
(956) 318-2079 FAX  
[josephine.ramirez@da.co.hidalgo.tx.us](mailto:josephine.ramirez@da.co.hidalgo.tx.us)

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**From:** Mike Escaname [mailto:miguel.escaname@hchd.org]  
**Sent:** Wednesday, June 13, 2012 4:45 PM  
**To:** josephine.ramirez@da.co.hidalgo.tx.us  
**Cc:** eddie.olivarez@hchd.org; lydia.serna@hchd.org; 'Connie Sanchez'  
**Subject:** BCBSTX GROUP AGREEMENT: HIDALGO COUNTY HEALTH DEPARTMENT - Request for Review

Hello Josephine:

We have placed an item on CC Agenda set for June 26, 2012 requesting authorization for Hidalgo County Health & Human Services Dept. to participate in the Blue Cross Blue Shield Professional Provider Network. (ref. AI-32816).

The intent is to offer health services to clients that are covered by Blue Cross Blue Shield health insurance.

This email contains two Agreements with their corresponding Attachment A which will require signature from our County Judge if this request is approved.

The two Agreements and their Attachments are, basically, slightly different health plans that Blue Cross Blue Shield offers. They are labeled in the attachment section of this email as:

- PPO Medical Group Core
- PPO Medical Group A
- HMO Medical Group Core
- HMO Medical Group A

Additionally, I must mention and direct your attention to the highlighted statement below. We inquired with the Blue Cross Blue Shield representative as to the statement which indicates that the title of the person signing must be have one of the titles listed. We informed the representative that our County Judge would be signing and that his title is Hidalgo County Judge; She stated that we can include the title of County Judge; however, the title needed to be followed by one of the titles listed below. She recommended we type "Administrator" next to Hidalgo County Judge.

Failure to include one of the titles listed below would cause our Agreements not to get processed.

We'd appreciate if you can review the Agreements and advise whether you approve as to form.

Please let Mr. Olivarez or me know if you have any questions or require additional information.

Thanks,

*Mike Escaname*

Budget Manager  
Hidalgo County Health & Human Services Dept.  
1304 S. 25<sup>th</sup> St  
Edinburg, Texas 78539  
956-383-6221



**From:** eddie.olivarez [mailto:eddie.olivarez@hchd.org]

**Sent:** Tuesday, June 12, 2012 9:00 PM

**To:** Mike Escaname (mike.escaname@hchd.org); lydia.serna@hchd.org; connie.sanchez@hchd.org; sandra.garza@hchd.org (sandra.garza@hchd.org)

**Subject:** Fwd: BCBSTX GROUP AGREEMENT: HIDALGO COUNTY HEALTH DEPARTMENT

VERY IMPORTANT

Eduardo Olivarez  
Chief Administrative Officer  
Hidalgo County Health & Human Services  
1304 South 25th Ave.  
Edinburg, Texas 78542

956-383-8858 Office  
[eddie.olivarez@hchd.org](mailto:eddie.olivarez@hchd.org)  
Twitter.com/hidalgohealth

----- Original Message -----

From: [PPNCorpusChristi@bcbstx.com](mailto:PPNCorpusChristi@bcbstx.com)

Sent: 6/12/2012 2:54:14 PM

To: [eddie.olivarez@hchd.org](mailto:eddie.olivarez@hchd.org)

Subject: BCBSTX GROUP AGREEMENT: HIDALGO COUNTY HEALTH DEPARTMENT

We have received your online Contract Request form. Enclosed are group **BCBSTX** managed care agreement(s). We have also included the BCBSTX Credentialing Request form which will provide the necessary information to order the Universal Provider Datasource (UPD) from Council for Affordable Quality Healthcare (CAQH)\* for each of your group providers. Once agreements are signed, fax all signature pages and the completed Credentialing Request Form to **(361) 852-0624**.

**In order for agreements to be accepted by BCBSTX, they must be signed and titled by one of the following representatives. Even if a provider is the sole owner, the contract still needs to reflect one of the following titles:**

- **President**
- **Chief Executive Officer**
- **Executive Director**
- **Managing Director**
- **Administrator**

#### **Step 1 - Get BCBSTX Provider Record**

Before claims submission, your new provider needs to be assigned a BCBSTX Provider Record ID. Please complete the Group Member Information Form and fax to number listed on the form. After faxing you may wish to verify your fax was received by BCBSTX by calling (972) 996-9610, option 3.

**IMPORTANT : Once you receive notification of your provider number please call our office so that we may guide you to the second step.**

\*\*\*Attached is a checklist titled BCBSTX Group Provider Worksheet which you may find helpful.

**Additional Credentialing Forms**

Please review the following categories to determine if additional documents are needed for credentialing. If appropriate fax the document to (361) 852-0624.

**Physicians** - Applicant must have admitting clinical privileges at network hospitals. If no admitting privileges exist, please complete the attached Hospital Referral Letter and fax to (361) 852-0624.

**Behavioral Health Providers** - Applicants must complete and submit the Behavioral Health Checklist and fax to (361) 852-0624.

\*For more information regarding **CAQH**, please visit our website at [http://www.bcbstx.com/provider/credentialing\\_process.htm](http://www.bcbstx.com/provider/credentialing_process.htm) or call the CAQH help desk at (888) 599-1771.

BCBSTX Professional Provider Network Department  
(361) 878-1623

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