BlueCross BlueShield of Texas

Invoices - Invoice Details

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 01/19/2013 - 01/25/2013 Process Date: 01/25/2013

Invoice Detail

Invoice Detail summarizes claims activity by association.

Claim Period: 01/19/2013 - 01/25/2013

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	$1,024,745.72	$282,077.67	$54,237.45	$0.00	$227,840.22	2,717
TX433	01	002	HEAD START	$240,782.75	$70,450.98	$14,566.63	$0.00	$55,884.35	894
TX433	01	003	APPRAISAL DISTRICT	$30,130.97	$5,542.68	$739.37	$0.00	$4,803.31	59
TX433	01	004	COMMUNITY SERVICE	$3,525.64	$821.13	$421.91	$0.00	$399.22	15
TX433	01	005	DRAINAGE DISTRICT	$65,036.09	$3,328.51	$1,422.95	$0.00	$1,905.56	68
TX433	01	006	RETIREES	$32,274.26	$10,071.01	$4,373.96	$0.00	$5,697.05	95
TX433	01	007	COBRA	$45,045.24	$2,251.16	$132.37	$0.00	$2,118.79	68
			Customer Total Claims	$1,441,540.67	$374,543.14	$75,894.64	$0.00	$298,648.50	3,916
			Customer Grand Total	$1,441,540.67	$374,543.14	$75,894.64	$0.00	$298,648.50	3,916

BlueCross BlueShield of Texas

Invoices - Invoice Details

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 01/26/2013 - 01/31/2013 Process Date: 02/01/2013

Invoice Detail

Invoice Detail summarizes claims activity by association.

Claim Period: 01/26/2013 - 01/31/2013

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	$1,264,999.88	$240,254.16	$0.00	$0.00	$240,254.16	1,917
TX433	01	002	HEAD START	$281,867.88	$41,085.13	$0.00	$0.00	$41,085.13	621
TX433	01	003	APPRAISAL DISTRICT	$33,556.25	$3,425.28	$0.00	$0.00	$3,425.28	49
TX433	01	004	COMMUNITY SERVICE	$4,621.30	$1,095.66	$0.00	$0.00	$1,095.66	34
TX433	01	005	DRAINAGE DISTRICT	$67,246.01	$2,209.92	$0.00	$0.00	$2,209.92	95
TX433	01	006	RETIREES	$38,857.89	$6,583.63	$0.00	$0.00	$6,583.63	73
TX433	01	007	COBRA	$47,228.01	$2,182.77	$0.00	$0.00	$2,182.77	37
			Customer Total Claims	$1,738,377.22	$296,836.55	$0.00	$0.00	$296,836.55	2,826
			Customer Grand Total	$1,738,377.22	$296,836.55	$0.00	$0.00	$296,836.55	2,826

BlueCross BlueShield of Texas

Invoices - Invoice Details

Invoice ID: TX433010006 - HIDALGO COUNTY

Invoice Period: 02/01/2013 - 02/08/2013 Process Date: 02/08/2013

Invoice Detail

Invoice Detail summarizes claims activity by association.

Claim Period: 02/01/2013 - 02/01/2013

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	$419,555.92	$419,555.92	$48,921.55	$0.00	$370,634.37	924
TX433	01	002	HEAD START	$25,075.50	$25,075.50	$15,439.94	$0.00	$9,635.56	286
TX433	01	003	APPRAISAL DISTRICT	$2,003.21	$2,003.21	$848.43	$0.00	$1,154.78	44
TX433	01	004	COMMUNITY SERVICE	$95.31	$95.31	$50.71	$0.00	$44.60	5
TX433	01	005	DRAINAGE DISTRICT	$563.80	$563.80	$56.76	$0.00	$507.04	21
TX433	01	006	RETIREES	$7,530.04	$7,530.04	$6,247.40	$0.00	$1,282.64	50
TX433	01	007	COBRA	$410.90	$410.90	$407.96	$0.00	$2.94	5
			Customer Total Claims	$455,234.68	$455,234.68	$71,972.75	$0.00	$383,261.93	1,335
			Customer Grand Total	$455,234.68	$455,234.68	$71,972.75	$0.00	$383,261.93	1,335