



NO-CONFLICT DISCLOSURE FORM

Project No.: RFP-26-0047-03-25-04

Project Name: 26-0047

Type of Service: Electronic Health Record (EHR) System and Implementation

Evaluator's Name: Laura Martinez, RN

Title/Position: Clinic Program Manager

Evaluated Firms:

1. E*HealthLine.com, Inc.
2. Medicalistics
3. Netsmart Technologies, Inc.
4. Patagonia Health
5. Wellness Center

Through my evaluation of the above-identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family, or gifts exceeding \$100) in connection with the aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Laura Martinez, RN
Signature

03/30/2026
Date



NO-CONFLICT DISCLOSURE FORM

Project No.: RFP-26-0047-03-25-04

Project Name: 26-0047

Type of Service: Electronic Health Record (EHR) System and Implementation

Evaluator's Name: Carlos Oliva

Title/Position: Division Manager II, Financial Accounting

Evaluated Firms:

1. E*HealthLine.com, Inc.
2. Medicalistics
3. Netsmart Technologies, Inc.
4. Patagonia Health
5. Wellness Center

Through my evaluation of the above-identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family, or gifts exceeding \$100) in connection with the aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Signature 

Date 3/30/26



NO-CONFLICT DISCLOSURE FORM

Project No.: RFP-26-0047-03-25-04

Project Name: 26-0047

Type of Service: Electronic Health Record (EHR) System and Implementation

Evaluator's Name: Dairen Sarmiento Rangel

Title/Position: Health & Human Services Director

Evaluated Firms:

1. E*HealthLine.com, Inc.
2. Medicalistics
3. Netsmart Technologies, Inc.
4. Patagonia Health
5. Wellness Center

Through my evaluation of the above-identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family, or gifts exceeding \$100) in connection with the aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Dairen S Rangel

Signature

3/26/2026
Date



2812 S. Bus. Hwy 281, Edinburg, Texas 78539 | Phone: (956) 318-2626 | www.co.hidalgo.tx.us/purchasing

NO-CONFLICT DISCLOSURE FORM

Project No.: RFP-26-0047-03-25-04

Project Name: 26-0047

Type of Service: Electronic Health Record (EHR) System and Implementation

Evaluator's Name: Eduardo Perez

Title/Position: Electronic Medical Records Specialist II

Evaluated Firms:

1. E*HealthLine.com, Inc.
2. Medicalistics
3. Netsmart Technologies, Inc.
4. Patagonia Health
5. Wellness Center

Through my evaluation of the above-identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family, or gifts exceeding \$100) in connection with the aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Signature

A handwritten signature in black ink, appearing to be "Eduardo Perez", written over a horizontal line.

Date

3-30-2026



NO-CONFLICT DISCLOSURE FORM

Project No.: RFP-26-0047-03-25-04

Project Name: 26-0047

Type of Service: Electronic Health Record (EHR) System and Implementation

Evaluator's Name: Maveli Martinez

Title/Position: Billing Supervisor III

Evaluated Firms:

1. E*HealthLine.com, Inc.
2. Medicalistics
3. Netsmart Technologies, Inc.
4. Patagonia Health
5. Wellness Center

Through my evaluation of the above-identified vendors, I hereby affirm that I have no conflicts to disclose (employment/business, family, or gifts exceeding \$100) in connection with the aforementioned potential vendor(s), as required by Section 176 of the Texas Local Government Code.

Maveli Martinez
Signature

3/30/26
Date