

Committed to patient advocacy.
Quality healthcare. Independent physicians.

September 1, 2009

To All PCOT Practices

Ladies and Gentlemen:

On August 18, 2009, the PCOT's Board of Directors executed a contract with Provider Strategies, Inc./ Provider Select, a private PPO network with executive offices in Ft. Worth, Texas.

This contract is to replace your previous access with HealthCare Partners of East Texas or East Texas Health Benefit Network. A summary of the contract terms, client list and other helpful information is attached.

If you wish to participate in the Provider Strategies, Inc./ Provider Select network through PCOT, please sign and return the option letter to PCOT by fax at 903-526-2320 or mail to the address noted below.

Should you have any questions, please feel free to contact Jennifer or Trish at 903-526-3268.

Brenda Shepherd, MBA, CPC, CPCS
Executive Director

Yes, our practice will participate through PCOT in the Provider Strategies Inc./ Provider Select contract. Please forward our opt-in to Provider Strategies Inc./ Provider Select.

No, our practice does not wish to participate in the Provider Strategies Inc./ Provider Select contract.

Date: \_\_\_\_\_\_ Practice Name: \_\_\_\_\_\_

Authorized Signature: \_\_\_\_\_\_

Tax I.D. No. \_\_\_\_\_\_

Printed Physician Name(s)

	Physicians Contracting Organization of Texas	
1	Contract Review Worksheet	
T	Date: June 2009	
	Background Informations	Notes .
1	Payor Name, Organizational Status	Provider Strategies, Inc/ Provider Select
2	Type of Organization	PPO.Rental Network
3	Type Product (any ERISA Plans?)	yes
4	Background Due Diligence, OIG Exclusion, TDI	clear; no reports
	1,000	Affordable; American Freightways, Assurant; Big Lots, Capital One,
		Concentra Health; Cooper Tire, Golden Rule, HealthFirst TPA,
		Mega Life; Mutual of America; NALC, New Era, Nextel, Tyson
5	Number of covered lives, major employers	Foods, Wells Fargo, Zenith Administrators
6	*Hospital affiliations	ETMC; Laird Memorial; all ETMC affiliate sites
7	Laboratory affiliations	DRL
<del>                                     </del>	Laboratory anniations	UNL
8	Benefit plan description (Covered Services defined)	LIOA
9	Provider procedure manual	yes :
9	Provider procedure mandar	refer to payor P&Ps
40	D-C	
10	References/ Notes	www.psippo.com
<del> </del>		
<u> </u>		
<u> </u>		
1	Rems : Land Company of the Company o	Notes
11	PCOT Agency Status defined	yes
12	Each party responsible for their own acts	yes
	Indemnify and hold harmless	yes .
	Arbitration & mediation non binding	
13	No assignment without consent (Silent PPO)	yes
14		yes
15		: directory only
<del>.</del>	THE HIBITICALING WAS GOTTOSTAL	directory only
16	Credentialing delegated	100
10	Oredendaming delegated	yes
17	Members can not be terminated w/o cause	
17		yes
18	Adequate grievance process	yes
4.0	No. 125	
		no with 45 day notice; must reject w/l 30 days
20	Access and confidentiality reasonable	yes
		not for claim payment; medical management; follow TMB
21	Members may charge for requested medical records	guidelines for payment
<u> </u>		
22		Texas; county where medical care is rendered
23	Max liability insurance required 200,000/ 600,000	State minimum
:		
24	Term: 1 year max	yes
25	Auto renewal	yes
26	:Termination w/o cause not > 90 days	yes
27	Termination Tail reasonable	per State Law, continuity of care language added.
		yes
28		
28		NAtoc
	Billing/Compensation	Notes
29	Billing/Compensation Claims processor (payor) identified	yes
29	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418	yes yes
29 30 31	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined)	yes yes per state law
29 30 31 32	Billing/ Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers	yes yes per state law yes
29 30 31 32 33	Billing/ Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file	yes yes per state law yes yes
29 30 31 32 33 34	Billing/ Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments	yes yes per state law yes yes yes yes
29 30 31 32 33	Billing/ Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments	yes yes per state law yes yes
29 30 31 32 33 34	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days	yes yes per state law yes yes yes yes
29 30 31 32 33 34	Billing/ Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments	yes           yes           per state law           yes           yes           yes           yes
29 30 31 32 33 34 35	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days	yes yes per state law yes yes yes yes claim appeal to one year
29 30 31 32 33 34 35	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days Enrollee identification process specified	yes yes per state law yes yes yes claim appeal to one year
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29 30 31 32 33 34 35	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days  Enrollee identification process specified Complete fee schedule Non Specified Workers Comp	yes yes per state law yes yes yes claim appeal to one year  yes 25% off billed charges
29 30 31 32 33 34 35 36 37	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days  Enrollee identification process specified Complete fee schedule Non Specified Workers Comp Meets PCOT Minimum Criteria	yes yes per state law yes yes yes claim appeal to one year  yes 25% off billed charges 25% off billed charges n/a
29 30 31 32 33 34 35 36 37	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days  Enrollee identification process specified Complete fee schedule Non Specified Workers Comp Meets PCOT Minimum Criteria Fee schedule fixed for contract period	yes yes per state law yes yes yes yes claim appeal to one year  yes 25% off billed charges 25% off billed charges n/a yes
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29 30 31 32 33 34 35 36 37	Billing/Compensation Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days  Enrollee identification process specified Complete fee schedule Non Specified Workers Comp Meets PCOT Minimum Criteria Fee schedule fixed for contract period Fee schedule review & increase at renewal (auto escalate)	yes yes per state law yes yes yes yes claim appeal to one year  yes 25% off billed charges 25% off billed charges n/a  yes
29 30 31 32 33 34 35 36 37 38	Claims processor (payor) identified Claims processor (payor) identified Claims paid < 30 days (or comply with SB418 Penalty for non timely payment (Predetermined) Payment to Non-Physician Providers Standard filing form (CMS 1500) acceptable; electronic file Right to coordination of benefits payments Retroactive adjustments within 90 days  Enrollee identification process specified Complete fee schedule Non Specified Workers Comp Meets PCOT Minimum Criteria Fee schedule fixed for contract period Fee schedule review & increase at renewal (auto escalate) New CPT Code Changes/Updates effective January 1st	yes yes per state law yes yes yes yes claim appeal to one year  yes 25% off billed charges 25% off billed charges n/a  yes no
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Provider Select, Inc.



SERVICES FAQ'S

ABOUT US CONTACT

FOR MEMBERS FOR PROVIDERS

FOR CLIENTS PROVIDER SEARCH

About US

HOME 🏈

Provider Select, Inc. is a privately held national provider network with our corporate and administrative offices located in Fort Worth, Texas.

Provider Select's successful performance as a corporation is directly related to the culture we live in every day. Our employees average more than six years in tenure, and collectively possess decades of experience in the industry. Our friendliness and dedication are demonstrated daily in our dealings with each other as well as with our clients, providers, and patients.

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SERVICES FAQ'S

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Service

HOME 🥙

**Remote Repricing** 

Claim Status Inquiry

Online Provider Nominations

**Workers Comp Network** 

Large Claim Negotiation

PSI contracts with medical providers including but not limited to hospitals, physicians, ambulatory surgery centers, home health agencies, mental health providers and laboratories.

PSI-negotiated discounts result in significant cost savings for our clients and contractual language insures non-discrimination in practice patterns.

PSIs provides utilization management, including catastrophic case management services.

Claim repricing services are available through PSI.

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FAQ<sub>5</sub>

Is Provider Select, Inc. my insurance company?

No, Provider Select, Inc. is not your insurance company. Provider Select, Inc. is your PPO. We discount the claims from participating providers and send them to your benefits administrator or insurance carrier for processing. Provider Select DOES NOT pay your benefits, process claims from non-Provider Select providers, or determine benefits coverage and eligibility.

Who do I contact with a provider complaint? Provider Select, Inc. has a quality assurance program. If you experience a problem with a network provider, contact our Member Service Department at 1-866-774-7766.

What if my doctor is not in the network?

Although you may have the option to obtain healthcare services at a non-participating provider, you are encouraged to choose a participating provider to reduce your out-of-pocket expenses.

How do I know if my doctor is in the network? Please contact the Provider Select Member Service Department at 1-866-774-7766. It's also a good idea to verify that the doctor participates in the network when you call to schedule an appointment.

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## Provider Select, Inc.

SERVICES
ABOUT US

FAQ'S

CONTACT

FOR MEMBERS

FOR PROVIDERS

FOR CLIENTS

PROVIDER SEARCH

Contact



General information (817) 426-3665

Toll free 1-866-774-7766

Fax (817) 426-0071 or (817) 426-4819

Sales & Marketing (817) 426-3665 ext. 204

Contact

Provider Relations (817) 426-3665 ext. 203 or ext 200

Technical Support (817) 426-3665 ext. 206

#### CLIENT LISTING PROVIDER SELECT, INC.

1921 IRON WORKERS ADMINISTRATIVE CONCEPTS, INC. AFFORDABLE HEALTH AND BENEFITS A & G FINANCIAL SERVICES **A&S FINANCIAL SERVICES** ALTERNATIVE RISK MANAGEMENT AMERICAN ADMINISTRATIVE GROUP AMERICAN CLAIMS EXCHANGE AMERICAN COMMUNITY MUTUAL INSURANCE AMERICAN FREIGHTWAYS, INC. AMERICAN INTERNATIONAL GROUP AMERICAN NATIONAL INSURANCE COMPANY ARETE USA, LLC ASR CORPORATION **ASSURANT HEALTH AUTOMATED BENEFIT SERVICES** BEACON CLAIM SERVICES BENEFIT ADMINISTRATIVE SYSTEMS BENEFIT SERVICES, INC. BIG LOTS, INC. CALIFORNIA WATER SERVICES CAMCO - DBA SUPERPAWN CAPITAL ONE FINANCIAL CATERPILLAR LOGISTICS, INC. CDS HEALTH PLANS CEMENT MASONS/LABORERS CHARTER COMMUNICATIONS CONCENTRA MANAGED CARE COMPETITIVE HEALTH PLANS COOPER TIRE AND RUBBER COMPANY CORPORATE BENEFIT SERVICES (CBSA) CORNERSTONE BENEFITS ADMINISTRATORS COVENANT ADMINISTRATORS CYPRESS BENEFIT ADMINISTRATION DEAN HEALTH PLAN DESERET MUTUAL BENEFIT ADMIN. **EBAM CORPORATION** EMPLOYEE BENEFIT MANAGEMENT CORP. **EMPLOYEE PLANS LLC** FEDERAL EXPRESS CORP. FEDERATED MUTUAL INSURANCE FIRST ADMINISTRATORS, INC.

FIRST AGENCY
FMH BENEFIT SERVICES, INC.
FREEDOM INSURANCE
GOLDEN RULE INSURANCE
GREAT AMERICAN INSURANCE GROUP

**GREAT WEST** 

GROUP HEALTH COOPERATIVE GROUP HEALTH OPTIONS, INC.

GROUP INSURANCE SERVICE CENTER

GROUP & PENSION ADMINISTRATORS

GROUP ADMINISTRATORS, LTD.

HCH ADMINISTRATION

HEALTH DESIGN PLUS

**HEALTH FIRST** 

**HEALTHNET** 

HEALTH PLAN ADMINISTRATORS, INC.

HEALTHSCOPE BENEFITS

HEALTH SERVICES BENEFIT ADMINISTRATORS, INC.

HEALTH SYSTEMS INTERNATIONAL

HFN, INC.

**ILWU-PMA** 

INETICO, INC.

INSTRUMENT SALES & SERVICE

INTEGRATED HEALTH PLAN, INC.

INTERNATIONAL MANAGED CARE SERVICES

J.T. PACKARD

KLUPENGER NURSERY AND GREENHOUSE

LIEN ON ME. INC.

LONDEN INSURANCE

LOOMIS COMPANIES

MAJOR TRANSPORT

MARSH AFFINITY GROUP SERVICES

MEDICAL BENEFITS ADMINISTRATORS

MEDICAL MUTUAL INSURANCE

MEGA LIFE AND HEALTH INSURANCE COMPANY

MERIDIAN HEALTHCARE

MERITAIN HEALTH

MIDWESTERN INSURANCE ALLIANCE

MONTGOMERY INSURANCE CO.

MONUMENTAL LIFE

MUTUAL ASSURANCE ADMIN.

MUTUAL OF AMERICA

NATIONAL ASSOCIATION OF LETTER CARRIERS PLAN

NATIONAL CARE NETWORK, LP

NATIONAL CHOICE CARE

NATIONAL CLAIMS ADMINISTRATIVE SERVICES

NATIONAL HEALTH BENEFITS CORPORATION NATIONAL HEALTHCARE SOLUTIONS, INC. NATIONAL HEALTH INSURANCE COMPANY

NEW ERA LIFE NEXTEL COMM.

NGS

NORCAL LABORERS NORGUARD INSURANCE NORTHERN TRUST CORP.

> NRECA ODS

OLD REPUBLIC INSURANCE OXFORD HEALTH PLAN

PREFERRED ONE HEALTH PLAN

PROFESSIONAL BENEFIT ADMINISTRATORS
PROGRESSIVE BENEFIT SERVICES

**RDWSU LOCAL 338** 

RESERVE NATIONAL INSURANCE COMPANY RETROSPECT MEDICAL AUDITING

RIVERSIDE BENEFIT ADMINISTRATORS

SECURITY HEALTH

SEVEN CORNERS, INC.

SOUTHWEST ADMINISTRATORS

STAR HRG

SUN HEALTHCARE GROUP

TC3 HEALTH

**TEAMSTERS LOCAL 560 BENEFIT FUNDS** 

TECO-WESTINGHOUSE

TENNESSEE INSURANCE GUARANTY

TEXAS MUTUAL INSURANCE

TOTAL PLAN SERVICES

TOWER LIFE INSURANCE

TRIDENT PLAN ADMINISTRATORS

TRUSTEED PLANS

TYCO INTERNATIONAL LTD

TYSON FOODS

**UNDERWRITER SAFETY & CLAIMS** 

UMR/BENESIGHT/FISERV

**UFCW NATIONAL** 

UFCW SC

UNITED AMERICAN INSURANCE COMPANY

UNITED GROUP PROGRAMS, INC.

UNITY HEALTH INSURANCE

U.S. BENEFITS CORP.

U.S. OIL COMPANY

U.S. SECURITIES

VANLINER INSURANCE
VICON INDUSTRIES
VOLUSIA HEALTH NETWORK
WELLS FARGO THIRD PARTY ADMINISTRATORS
WESTERN SOUTHERN LIFE
WORLD INSURANCE COMPANY
ZENITH ADMINISTRATORS