

Request for Consent to Assignment of Provider Contracts

Provider Number(s) Affected (BCBSTX *internal use only*): _____

BCBSTX Facility Provider Representative: _____

Name of Provider Representative Handling Request: _____

Date Received for Processing: _____

SELLER/ASSIGNOR

Former Tax ID: _____

Legal Name of Seller/Assignor: _____

Name of Facility: _____

NPI Number: _____

License Number: _____

Contact Name: _____

E-mail Address: _____

Telephone Number: _____

Fax Number: _____

Facility Physical Address: _____

Seller's Mailing Address: _____

Seller currently enrolled for EFT (Electronic Funds Transfer) with BCBSTX: Yes No

PURCHASER/ASSIGNEE

New Tax ID: _____

Legal Name of Purchaser/Assignee: _____

Name of Facility after transfer: _____

New Operating NPI Number: _____

New Operating License Number: _____

Contact Name: _____

E-mail Address: _____

Telephone Number: _____

Fax Number: _____

Changes to Facility Physical Address (if applicable): _____

New Administrative/Payee Address (if applicable): _____

Purchaser Mailing Address (if different than Payee address): _____

Purchaser prefers to receive payments via:
 Paper Check EFT (EFT Agreement required)

1. Effective Date of Ownership Change: _____
2. Has BCBSTX's consent of assignment of provider contracts for this change of ownership been previously requested?
 Yes No If so, attach notification document(s) with this questionnaire.
3. Type of Sale:
 - A. **Stock Sale:** This is a sale of stock of a corporation that owns a facility.
 - Did this sale include sale of stock? Yes No
 - If so, what percentage of stock was sold? _____%
 - B. **Asset Purchase Sale:** This is a sale in which the assets (i.e., real estate, equipment, contracts) of the Facility are being sold (or assigned) by the current owner ("Seller") to a new owner ("Purchaser").
 - Is the transfer pursuant to an Assets Purchase Sale? Yes No
 - Are the provider contracts intended to be transferred to Purchaser pursuant to an asset purchase agreement? Yes No
 - C. **Quality Incentive Payment Program (QIPP) Lease Arrangement:** Yes _____ No _____
Allows facility owner to retain facility management, negotiation and signatory authority.
 - D. **Other Type of Sale / Transfer** (please explain):

Request for Consent to Assignment of Provider Contracts, Continued

4. Unless otherwise excluded below all active BCBSTX provider contracts will be considered a part of this request for consent to assignment of provider contracts. Please indicate which BCBSTX provider contract(s) (by name and effective date) if any, are **NOT** parts of the ownership/transfer change?

Note: The indicated networks will be terminated immediately upon approval of this request by BCBSTX.

BCBSTX Contracts Excluded from Transfer

_____	Effective Date _____
_____	Effective Date _____
_____	Effective Date _____

5. Are rates and terms & conditions of BCBSTX Provider contract(s) with Seller acceptable to Purchaser? Yes No

6. Does the Seller intend to retain any liabilities? Yes No If yes, please provide details:

7. Are there any known claims or disputes (e.g., overpayment/underpayment to seller) between BCBSTX and Seller?
 Yes No If yes, please provide details and status of dispute?

By completing and executing this Consent to Assignment of Provider Contracts, Seller/Assignor and Purchaser/Assignee are certifying the accuracy of the information contained herein and are requesting the consent of BCBSTX to the assignment of the Provider Contracts to Purchaser/Assignee.

Seller/Assignor

Signature: _____

Printed Name: _____

Title: _____

Date: _____

Approval of BCBSTX

Signature: _____

Printed Name: _____

Title: _____

Date: _____

Purchaser/Assignee

Purchaser/Assignee expressly agrees to assume the obligations of Seller/Assignor and the terms and conditions of the Provider Contracts.

Signature: _____

Printed Name: _____

Title: _____

Date: _____

Supporting Documents Required:

- New W9
- New License
- New Owner Certificate of Liability
- NPI Enumeration Email / Letter

Update E-Commerce & Availability information:

<https://www.bcbstx.com/provider/claims/index.html>
https://www.bcbstx.com/provider/claims/edi_commerce.html
https://www.bcbstx.com/provider/claims/edi_availability.html