BlueCross BlueShield of Texas

Producer Supply Order Form

Enrollment Brochures		Quantity Requested
50400	Series III Enrollment Guide	
49791	PPO Select Basic Enrollment Guide	
42989	PPO Select Value Care Enrollment Guide	
47492	BlueEdge Individual HSA Enrollment Guide	
47711	Foundation Hospital Care Enrollment Guide	
46086	SelecTEMP PPO Enrollment Guide	
50592	Series III Enrollment Guide - Spanish	
43792	PPO Select Value Care Enrollment Guide – Spanish	
Current Products Additional Supplies		***Quantity Requested***
41745	Universal Application/Miscellaneous Change Form ***Series III***	
42966	Universal Application/Miscellaneous Change Form – Spanish ***Series III***	
42352	Universal Application/Misc Change Form - Special Offer ***Series III***	
48622	Select Family Sales Brochure	
43374	Select Blue Advantage Sales Brochure ***Series III***	
48579	PPO Select Choice Sales Brochure ***Series III***	
42983	PPO Select Saver Sales Brochure ***Series III***	
51164	BlueEdge Individual HSA Application/Misc. Change Form	
51165	BlueEdge Individual HSA Application - Special Offer	
47054	BlueEdge Individual HSA Sales Brochure	
42684	PPO Select Value Care Application/Misc. Change Form	
44320	PPO Select Value Care Application/Misc. Change Form – Spanish	
48619	PPO Select Value Care Sales Brochure	
42320	Foundation Hospital Care Application/Misc. Change Form	
40511	PPO Select Basic Application	
41694	PPO Select Basic Miscellaneous Change Form	
51436	Application for Automatic Bank Draft	
Provider Directories	☐ 2849.440 **Northeast** ☐ 2646.390 **Southeast** ☐ 2624.370 **Central** ☐ 2849.430 **West/Northwest**	
2849.276	Court Mandated Form	
4761.000	List Bill Agreement	

Miscellaneous Change Forms for Closed Books of Business can be located on the web, as well as the Underwriting and Administrative Guides.
Please log in to the Producers' Portal at http://www.bcbstx.com/producer/ for downloadable forms.

Producer Number: 0 0 0 0 _____ **Supplies cannot be sent without Producer number.**

Fax number: ( ) - **Telephone number:** ( ) -

Mail Supplies to:	**Producer Name:**						
	Address:						
	City:	**TX**	7				

Fax this completed form to **(972) 766-8253** for supplies. If you need forms immediately, or forms not listed here, please log in to the Producers' Portal at http://www.bcbstx.com/producer/ for downloadable forms.