

ECP Screenshots

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ECP Introduction & Setup

Select ECPs

Select ECPs

You must add and complete ECP details.

[Add ECPs](#) [Remove ECPs](#)

[Search](#)

ECP Reference Number	NPI	Site Street Address			
TX-010329	1265810642	1749 Pine St Abilene, TX 79601-3043 Taylor	-Select-		Edit Remove
TX-023134	1134556798	212 S Leggett Dr Abilene, TX 79605-1628 Taylor	-Select-		Incomplete Edit Remove
TX-023135	1699741975	2626 S Clack St Abilene, TX 79606-1557 Taylor	-Select-		Incomplete Edit Remove

- Select-
- Contract Executed
- Contract Offer Made-Awaiting Response
- Pre-contract Negotiations in Progress (Offer Not Made Yet)
- Offer Rejected
- Contract Not Offered Due to No Response Following Issuer Outreach
- Facility Closed
- Facility Does Not Contract and Has No Interest to Contract with Commercial Insurance
- Facility Does Not Provide Medical Services
- Facility Does Not Provide Dental Services
- Provider is in an Exclusivity Contract That Prohibits Us From Contracting With Them
- Provider is Not Licensed, Accredited, or Certified by the State
- Provider Has Relocated Outside Service Area Preventing Us From Contracting With Them

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[Download ECPs \(CSV\)](#)

ECP Reference Number	NPI	Site Street Address	Negotiation Status	Network ID	Status & Action
TX-010329	1265810642	1749 Pine St Abilene, TX 79601-3043 Taylor	-Select-		Incomplete Edit Remove
TX-023134	1134556798	212 S Leggett Dr Abilene, TX 79605-1628 Taylor	-Select-		Incomplete Edit Remove
TX-023135	1699741975	2626 S Clack St Abilene, TX 79606-1557 Taylor	-Select-		Incomplete Edit Remove

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1415. This information collection requires QHP issuers, including SADP issuers, to ensure access to a sufficient number and geographic distribution of essential community providers (ECPs), where available, that serve predominantly low-income, medically underserved individuals. The time required to complete this information collection is estimated to average less than 1,458 hours per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is mandatory under 2702(c) of the Public Health Service Act and will be kept private in accordance with regulations at 45 CFR 155.260, Privacy and Security of Personally Identifiable Information. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850 and Elizabeth.Hechtman@cms.hhs.gov, Attention: Information Collections Clearance Officer.

Application
41549TX-2025-07

Plan Year
2025

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ECP Introduction & Setup

Select ECPs

Edit Details: TX-010329

GIID

ECP Details

ECP Reference Number TX-010329	National Provider Identifier (NPI) 1265810642
Provider Site Name Abilene Community Health Center	Organization Name TEXASTECH UNIVERSITY HEALTH SCIENCES CENTER
Site Street Address 1749 Pine St Abilene, TX 79601-3043 Taylor	
ECP Categories Federally Qualified Health Centers - Medical Services	

Provider contract Details

All fields are required.

Negotiation Status
Once you select a negotiation status, additional required fields will display.

I-Select- _____

Network ID _____

Save Save and Duplicate Cancel

Edit Details: TX-010329

GIID

ECP Details

ECP Reference Number TX-010329	National Provider Identifier (NPI) 1265810642
Provider Site Name Abilene Community Health Center	Organization Name TEXASTECH UNIVERSITY HEALTH

Contract Executed

Contract Offer Made-Awaiting Response

Pre-contract Negotiations in Progress (Offer Not Made Yet) Offer Rejected

Contract Not Offered Due to No Response Following Issuer Outreach Facility Closed

Facility Does Not Contract and Has No Interest to Contract with Commercial Insurance

Facility Does Not Provide Medical Services

Facility Does Not Provide Dental Services

Provider is in an Exclusivity Contract That Prohibits Us From Contracting With Them

Provider is Not Licensed, Accredited, or Certified by the State

Provider Has Relocated Outside Service Area Preventing Us From Contracting With Them

Network ID
Select _____

Save Save and Duplicate Cancel