Special Bulletin

For professional providers

November 13, 2023

Highmark Blue Shield Moving New York Providers to Group Contracts

Highmark Blue Shield is beginning the process of moving professional providers in its New York markets onto Highmark Professional Agreements - which are group contracts that match the structure that is in place in the other Highmark service regions.

Provider groups with newly contracted individual practitioners will receive Highmark Professional Agreements(s) beginning on **December 4, 2023**. Practices without newly contracted individual practitioners should start seeing the new contracts in their email inboxes in the second quarter of 2024.

Key Information

Here are some things to know:

 The Highmark Professional Agreements apply to all professional providers who want to participate in our networks and will apply to both group practices and individual practitioners. The agreements govern all providers affiliated with a specific Tax Identification Number (TIN). Each individual practitioner is **no longer required** to sign his/her own agreement. Highmark uses this structure for ease of administration for the provider group and for Highmark.



- You may receive two contracts: one for Medicare Advantage plans and another for all non-Medicare health plans.
 - Note: If Highmark has delegated management of any product to a third party, the terms of the contract in place with any such management contractor will control.
- Your reimbursement rates will not change. The process of moving from individual to group contracts is not an opportunity to renegotiate your rates with Highmark.
- Participating professional providers can view the standard allowances on the Provider Resource Center (PRC) through <u>Availity®</u> or <u>NaviNet®</u>. From the secure PRC home page, click CLAIMS, PAYMENT & REIMBURSEMENT in the left-hand menu and then Fee Schedule Information.

- For providers who have legacy agreements with Highmark Blue Shield of Northeastern New York, the new Highmark Professional Agreement(s) will <u>not</u> include an Attachment A – which listed coverage plans. Instead, base networks will be noted on a separate Welcome Letter.
 - o Credentialing requirements are outlined in Chapter 3 of the *Highmark Provider Manual*.

What to Expect

Your practice should receive an email(s) from <u>PIMContracts@highmark.com</u> with the new contract(s) attached. Please add this email address to your Address Book to ensure the contract(s) does not end up in your Spam folder. The email address above is not regularly monitored, so please do not send or reply directly with questions.

Once you receive the contract(s), we would advise you/your practice to review the new agreement(s) and ensure you understand the differences and the appropriate signatory is provided.

To ensure we have the correct email address on file for you/your practice, you can verify/update electronically. Professional providers can do so in our **Provider Data Maintenance** tool, which is accessible in our provider portal (either <u>Availity</u> or <u>NaviNet</u>).

Questions?

We have created a <u>Frequently Asked Questions</u> document to answer any outstanding concerns. We will also provide more information in our monthly newsletter, *Provider News*. You can ensure you receive that newsletter by signing up to be included on our <u>eSubcribe list</u>.

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