

SPECIAL BULLETIN

FOR PROFESSIONAL AND FACILITY PROVIDERS

MAY 11, 2016

ATTN: PARTICIPATING PROVIDERS

HIGHMARK DELAWARE AND BAYHEALTH MEDICAL CENTER CONTINUITY OF CARE

As you know, Highmark Blue Cross Blue Shield Delaware has been in contract negotiations with Bayhealth Medical Center. Unfortunately, despite our good faith efforts, we have not been able to reach a new agreement on reimbursement rates. The current agreement will end on May 15, 2016. **As of May 16, 2016, Bayhealth Medical Center will be out-of-network.**

Note: This contract termination will not affect Highmark Delaware members with Medicare Supplemental or Medigap coverage, or those with Medicaid (through Highmark Health Options). These members may continue to receive services at Bayhealth after May 15, 2016, at the in-network level of benefits, since the hospital will remain a participating provider for these members.

CONTINUITY OF CARE MAY BE AVAILABLE FOR YOUR HIGHMARK DELAWARE PATIENTS IN AN ONGOING COURSE OF TREATMENT AND PATIENTS RECEIVING CARE FOR MATERNITY SERVICES

Highmark Delaware will provide a "Continuity of Care" process for your patients when they are in an ongoing course of treatment. If they request and are approved for Continuity of Care, this will allow a transition period for care with an existing provider to continue after May 15, 2016, for up to one hundred and twenty (120) days. For services to be covered under the Continuity of Care process, your patients must first call the Member Service team at the telephone number on their Highmark Delaware ID cards. Highmark Delaware must approve the request.

How Can Your Patients Request Consideration for Continuity of Care?

Your patients may contact Member Service to request Continuity of Care, and Highmark Delaware will review the request for medical necessity. If approved and in an ongoing course of treatment, your patients may continue care for up to one hundred and twenty (120) days, or through post-partum care related to delivery. As your patients approach the end of the Continuity of Care period or if they do not select this option, Highmark Delaware Member Service will work with your patients to transition their care to another in-network provider.



How will procedures that are preauthorized and scheduled surgeries be handled for your patients?

Preauthorized or scheduled procedures that qualify and are approved for Continuity of Care will be covered throughout the Continuity of Care period as described above. As your patients approach the end of that period, Highmark Delaware will pend any authorizations that come in for review so that Highmark Delaware's Care and Case Management staff can work with your patients on their transition of care options. Your patients can request an extension if the surgical period lasts longer. This is the same for maternity, if the patient has complications.

How can we identify that your patients are in need of Continuity of Care?

Case Management health coaches are prepared to assist your patients with Continuity of Care.

Does Continuity of Care impact your patients' out-of-network benefits?

No. When a Continuity of Care review has been completed and your patients' clinical condition qualifies for Continuity of Care, their claim will be paid at the in-network level of benefits.

How will claims be handled if your patients are already inpatients at the time of the termination?

If your patients are inpatients at Bayhealth at the time the contract terminates, your patients' claims will process at the in-network level of benefits.

If you have questions, please call our Provider Service staff. They will be ready and able to assist you in addressing whatever questions you may have related to this information.