

# SPECIAL eBULLETIN

FOR PROFESSIONAL AND FACILITY PROVIDERS

MARCH 09, 2020

## CLARIFICATION TO “PROVIDERS RESPONSIBLE FOR DISCUSSING MEDICAL POLICY WITH MEMBERS” EBULLETIN

On Friday, **February 28, 2020**, we shared a Special Bulletin entitled, “PROVIDERS RESPONSIBLE FOR DISCUSSING MEDICAL POLICY WITH MEMBERS” which included an updated member disclaimer that read as follows:

*Your health care program provides benefits for covered services you receive from an eligible provider when these covered services are determined to be medically necessary and appropriate under related medical policies. For additional information related to Medical Policies, please discuss with your healthcare provider.*

We apologize that the disclaimer was written in a way that may have created confusion. Highmark has since evaluated the disclaimer further and have updated the language to retract and remove the sentence:

*For additional information related to Medical Policies, please discuss with your healthcare provider.*

Our intent was to convey to our members that our Medical Policies do not replace a provider’s independent medical judgment for treatment. Highmark wants our members to inquire about medical necessity in discussing specific care and recommended treatment in the context of our Medical Policies with their treating providers.

To further clarify:

- The disclaimer does **NOT** apply to members calling regarding claims disputes or claim denials. Highmark’s Customer Service Advocates will always explain the details behind those decisions.
- We do **NOT** expect providers to communicate Highmark Medical Policies. If a member asks to see a Medical Policy, we will provide the member with the requested policy.
- If a member asks our Customer Service Advocates for details on a specific benefit, **BEFORE** diagnosis or **BEFORE** a claim is submitted, we will share the member’s benefit details which may



include copay, out of pocket expense, and benefit maximum. At that time, the Customer Service Advocate will also share the updated member disclaimer:

*Your health care program provides benefits for covered services you receive from an eligible provider when these covered services are determined to be medically necessary and appropriate under related Medical Policies.*

Again, we are sorry for any concern this disclaimer has caused you or your patients. We hope this helps clarify the previous communication and encourage you to contact your Provider Representative or the Provider Service Center at **866-731-8080** with any additional questions.