

Highmark High Performance Skilled Nursing Facility Network FAQ

January 2024

Q: Why did Highmark choose to implement the High Performance Skilled Nursing Facility (SNF) Network?

A: Our customers demand that we offer products that emphasize high-quality medical care and provide greater value for their health care dollar. To meet this objective, Highmark developed a high-performing network made up of select participating skilled nursing facilities. The High Performance SNF Network will support certain Highmark 2024 product offerings.

Q: What metrics were used to evaluate the participating SNFs?

A: Highmark used the same metrics that have been tracked as part of the Highmark Health Helion Home and Community Cares' efforts to manage the SNF network for the previous five years. Scorecards are made available quarterly to participating providers to notify them of their results.

Q: My latest scorecard shows that my facility has improved significantly. Why am I not included in the High Performance SNF Network?

A: Inclusion in the High Performing SNF network is largely based on the facility's performance on scorecard metrics, and consistency across measurement periods is a critical factor. Providers who have demonstrated a consistent record of high performance will be considered, while those that show marked improvement over a short period must maintain that success to be considered for future inclusion.

Timing is a factor as well. Highmark is held to regulatory deadlines and therefore network decisions need to be made in time for providers and members to be notified prior to the end of the year. As such, decisions were made based on the most current data available at the time.

On an annual basis, Highmark will reevaluate its network composition and make changes as necessary.

Q: Which products use the High Performance SNF Network?

A: The High Performance SNF Network will apply to my **Direct Blue**, **Community Blue Medicare**, **Together Blue***, **Complete Blue**, and **Together Blue Medicare*** as well as the **National Performance Blue** products. The participating SNFs included in the High Performance SNF Network will be considered in-network providers for High Performance SNF Network products.

**Together Blue Commercial and Together Blue Medicare Products are limited to Allegheny, Butler, Washington, Westmoreland, and Erie counties. Only High Performance Network (HPN) providers in those counties will be participating for these products.*

For most **Commercial tiered products**, participating providers selected for the High Performance SNF Network will be placed in the highest benefit tier. Participating providers not selected for the High Performance SNF Network will be placed in a lower benefit tier.

Q: How will our change in network participation status for certain products impact our residents who are Highmark members as of Jan. 1?

A: In accordance with 42 CFR § 422.133 (Return to home skilled nursing facility), members enrolled in **Community Blue Medicare, Complete Blue, or Together Blue Medicare** products will continue to have coverage at the in-network benefit level through a home SNF for post-hospital extended care services as long as they resided in the nursing facility prior to the hospitalization and they elect to continue to receive care through that home SNF.

This would include facilities with Long Term Care residencies, as well as facilities classified as Continuing Care Retirement Communities (CCRC) with either personal care, assisted living, and/or independent living options within their campus. "Part B" type services like physical therapy, however, would NOT be considered at the in-network level of benefits.

Affordable Care Act (ACA) My Direct Blue members who are long-term residents will not have covered benefits for "Part A-Type" skilled nursing services, and Commercial members with tiered benefits will incur higher out-of-pocket costs for "Part A-Type" skilled nursing services at your facility. Additionally, please note that in order to provide physical therapy, outpatient, or other "Part B-Type" services to Commercial members, you must obtain a professional agreement and assignment account.

Highmark **Commercial** Agreements with SNFs are only inpatient agreements and do not contain provisions for outpatient services. SNFs contracted with Highmark for Commercial products could bill for outpatient services only when 1) the therapists have been credentialed; 2) a Highmark Assignment Account has been established for the SNF to bill on behalf of the credentialed/contracted therapists; AND 3) all services are billed utilizing the electronic 837 Professional Claim or the CMS 1500 Claim process.

Q: Are my Highmark patients aware of the implementation of the High Performance SNF Network?

A: Highmark members in affected products who have claims records indicating that they recently received services from participating providers not included in the High Performance SNF Network as of Jan. 1, 2024, will be notified via U.S. postal mail.

Q: What if there are no High Performance SNF Network providers available in my patient's location?

A: Highmark has carefully evaluated its High Performance SNF Network providers to ensure that members in all counties in Pennsylvania have adequate access at the highest benefit level.

Q: What region does this apply to?

A: The High Performance SNF Network is applicable to Highmark's service areas within Pennsylvania. *This does not include the Southeastern Pennsylvania service area at this time.*

Q: How often are tiering and network selection determinations made?

A: Tiering and network selection determinations are made annually and are based on the most current performance data. Highmark cannot make changes to its provider networks more than once a year due to regulatory constraints.

Q: How do I improve my performance to change my status for the next calendar year?

A: Highmark suggests that all participating providers focus on improving their performance on the quarterly scorecard metrics. Contact your Helion NPM for more information.

Q: How does Network participation status impact Commercial claim submission?

A: There is no immediate impact to the way in which you currently submit Commercial claims regardless of network status.

Q: How does Network status impact Medicare Advantage claim submission?

A: For providers participating in the High Performance Network, there will be no immediate impact to the way in which you currently submit claims for your Highmark Medicare Advantage members.

However, if you are NOT participating in the High Performance Network, you will be considered out of network for the Community Blue, Complete Blue and Together Blue Medicare Advantage Products. As such, you will be required to submit claims for those members in the Patient Driven Payment Model (PDPM) format, using the applicable Health Insurance Prospective Payment System (HIPPS) codes. Claims for these members will be processed and paid according to the PDPM processing and pricing rules established by the Centers for Medicare and Medicaid Services (CMS).

For Example:

Scenario 1:

- SNF A does NOT participate in the High Performance network and is considered out of network for the Community Blue Medicare, Complete Blue and Together Blue products, but still participates with the Security Blue and Freedom Blue Products.
- SNF A should submit claims for their patients enrolled in Security Blue and Freedom Blue products per their current contracted Reimbursement Methodology (Episodic/RUGs/PPS HIPPS Codes).
- SNF A should submit claims for their patients enrolled in Community Blue Medicare, Complete Blue and Together Blue Products using the PDPM Reimbursement Methodology (i.e., using PDPM HIPPS Codes).

Scenario 2:

- SNF B participates in the High Performance Network and is considered in network with Security Blue, Freedom Blue, Community Blue Medicare, Complete Blue, and Together Blue Products.
- SNF B should continue to submit ALL Medicare Advantage claims for their patients per their current contracted Reimbursement Methodology (Episodic/RUGs/PPS HIPPS Codes).

Q: Where can I submit questions?

A: Please send your questions via email to: AncillaryProviderContractAdministration@Highmark.com.

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