

# SPECIAL eBULLETIN

FOR FACILITY PROVIDERS

OCTOBER 12, 2020

*ATTN: HOME HEALTH AGENCIES*

## HIGHMARK CONTINUES TO OFFER THE HIGH PERFORMANCE HOME HEALTH AGENCY NETWORK IN 2021

Highmark is committed to working with health care providers to make sure our members receive high quality health care at an affordable price. That's why Highmark monitors participating home health agencies' performance to ensure that they are adhering to established clinical protocols that lead to better outcomes and lower costs for our members.

On January 1, 2020, Highmark launched a network of home health agencies as part of its commitment to working with health care providers to make sure that our members receive high quality health care. The network changes were required to meet marketplace demand and to provide competitive options to our customers. Highmark is again committed to this endeavor in 2021.

Using a specific set of performance metrics, Highmark measured the components of the care provided by participating home health agencies and the quality outcomes of these providers. As a result of that review, Highmark determined that while all participating home health agencies provide quality care, some providers had higher readmission rates, higher emergency department utilization, and higher than average cost per episode — all of which can lead to suboptimal outcomes and higher costs for members.

As such, on January 1, 2021, only those participating home health agencies that performed at the highest levels have been included again in the new High Performance Home Health Agency Network. These providers have also been placed at the highest benefit tier for those commercial tiered products using the High Performance Home Health Agency Network.

The Highmark High Performance Network will include both skilled nursing facilities and home health agencies. You are encouraged to collaborate with the other post-acute care providers in this network to ensure that the members you are caring for receive the best outcomes at the lowest cost share possible.

### PRODUCTS FEATURING THE HIGH PERFORMANCE NETWORK

Participating providers selected for inclusion in the High Performance Home Health Agency Network will constitute the entire network for members who have the following Highmark products:



- Community Blue Medicare
- my Direct Blue Commercial ACA
- Performance Blue Regional and National
- Together Blue
- Complete Blue

Providers who are not selected for the High Performance Home Health Agency Network will be considered out-of-network providers for members enrolled in these Highmark products. It is important to note, however, that those not selected to participate in the High Performance Network will continue to be a participating provider in all other Highmark networks.

## PRODUCTS WITH TIERED BENEFITS

High Performance Home Health Agency Network providers are designated to participate at the highest level of benefits for most products with tiered benefits. The participating home health agencies not designated for the highest level will participate at the lower tier, resulting in additional member cost share.

For both types of tiered benefits, members will have access to quality providers at varying benefit levels. Choosing a provider who participates at the highest level of benefits will result in the lowest cost-sharing amounts for members.

**It is recommended that you validate the network(s) and each tier of benefits that your facility continues to participate in via NaviNet® beginning January 1, 2021.**

## WHAT THIS MEANS FOR YOU

It is imperative that providers understand their network participation status to avoid denials or increased member cost share. Availability of benefits under the member's benefit plan is required in order for a service to be reimbursed by Highmark. Be sure to confirm the specific member cost-sharing responsibility for services for each member. Availability of benefits can be verified through the Eligibility and Benefits function in NaviNet.

Highmark noticed that early in 2020 these benefit checks may not have been occurring uniformly across our home health agency network. In the best interests of our members, we will continue to monitor this process during 2021 to confirm that providers are taking the appropriate steps to ensure that they are in network for all accepted admissions or that the member has been appropriately notified of any cost sharing implications of receiving out-of-network care.

On an annual basis, Highmark will reevaluate its High Performance Network composition and make modifications as necessary. Highmark will notify you directly should your network participation status change.

For additional information, **including claims filing instructions**, please refer to the **Frequently Asked Questions** located on the **High Performance Home Health Agency Network** page located under **HIGH PERFORMANCE NETWORKS** on the Provider Resource Center.

Any other questions about the changes should be sent to:

**[AncillaryProviderContractAdministration@Highmark.com](mailto:AncillaryProviderContractAdministration@Highmark.com)**