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SPECIAL BULLETIN

FOR PROFESSIONAL AND FACILITY PROVIDERS

APRIL 28, 2017

ATTN: INDEPENDENT CLINICAL LABORATORIES

HIGHMARK TO UPDATE LABORATORY FEES, EFFECTIVE 7/1/17

Effective July 1, 2017, Highmark Blue Cross Blue Shield West Virginia will adjust the Laboratory Fee Schedule to 85 percent of the current Centers for Medicare & Medicaid Services (CMS) lab fee schedule.

Also, the Highmark West Virginia Medicare Advantage fee schedule will align to the Highmark Pennsylvania Medicare Advantage fee schedule of 70 percent of the Commercial fee schedule.

This change will impact independent clinical laboratory allowances for the Clinical Diagnostic Laboratory Fee Schedule in the West Virginia region.

As always, fee information is available via NaviNet®, and the updated clinical laboratory fees will be viewable on July 1, 2017. Hover on **Allowance** and select:

-over-

- **Allowance Inquiry** to determine pricing for specific procedure codes by plan/product type.
- **Frequently Billed Codes**, which initiates a report request that provides the most frequently billed codes/procedure codes based on the specialty represented by the selected billing provider and plan.

Please be sure to share this information with your billing staff and/or vendor.

If you have questions, please contact your Highmark provider account liaison. If you don't have NaviNet, visit navinet.net to gain access to the system.

As always, we appreciate your service to our customers, and we value our long-standing partnership in caring for the residents of West Virginia.