



INTRODUCING THE HIGHMARK PROVIDER MANUAL!

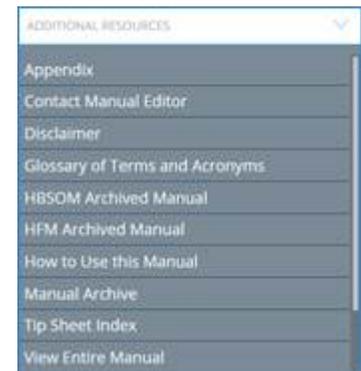
ONE SOURCE FOR INFORMATION FOR ALL PROVIDERS

We are pleased to announce that the new *Highmark Provider Manual* is now available! We have consolidated the information from the *Highmark Blue Shield Office Manual* and the *Highmark Facility Manual* into one manual to serve as the primary online resource for all providers — professional, facility, and ancillary — in all of our service areas in Pennsylvania, Delaware, and West Virginia. Although the information is the same, we've organized it in a way that will help you find the information you need more easily. The *Highmark Provider Manual* is available under **EDUCATION/MANUALS** on the Provider Resource Center. It can also be accessed quickly by selecting **MANUALS** on the **Quicklinks Bar**.

The *Highmark Provider Manual* is comprised of six chapters based on key categories of content: General Information, Product Information, Provider Network Participation, Provider Responsibilities and Guidelines, Care and Quality Management, and Billing and Payment. And units within the chapters focus on more specific topics related to the broader categories, with separate units for specific provider types, when necessary. Unit titles will identify if the unit is specific to professional or facility providers or, in some cases, a particular provider type, for example, Chapter 4.4: Ancillary Providers. Also, look for the icon on the first page of each unit that will help to identify whether the unit is intended for Professional Providers, Facility Providers, or All Provider Types.

Along with our traditional chapter/unit format, we've also kept other features from the former manuals that can be accessed from **ADDITIONAL RESOURCES** at the bottom of the manual's home page. You can still access all tip sheets from throughout the manual in one location — the Tip Sheet Index. And all of the manual's units are available as one single PDF document that lets you search the entire manual by keyword if you're not able to determine which unit contains the information you're seeking. Also in this location are the archived versions of the former professional and facility manuals for historical reference, if needed.

As in the previous manuals, blue italic text will still be used to identify new or updated information. The ***Why blue italics?*** icon will be placed wherever there are blue italics (*just in case you may forget the reason for the blue italics!*).



WHAT'S NEW?

We've added a new feature, the **Quick Reference**, at the top of the manual's home page. This is a one page reference for the Highmark phone numbers you need the most — the Provider Service Center and Clinical Services. If you need another phone number, you'll find a link on the document that will take you to the manual unit that contains additional contact information. We've also created a Quick Reference icon that you'll see throughout the manual to provide easy access to these important phone numbers from within the manual.

As always, we welcome your feedback so that we can make the manual as helpful as possible for you. If you would like to comment on or make suggestions for additional improvements to the *Highmark Provider Manual*, please email your comments to HPMeditor@highmark.com.

If you haven't signed up for e-Subscribe yet, be sure to do so to receive our end-of-the-month "Highmark Provider Manual Updates" emails describing all updates and additions to the manual during the month. You'll also receive other information by signing up for e-Subscribe — *Provider News* and *Medical Policy Update* newsletters as well as the In Case You Missed It notifications telling you about important messages you may have missed. To subscribe, select **NEWSLETTERS/NOTICES** from the main menu on the Provider Resource Center, and then **E-Subscribe For Publications And Notifications**.