



BlueCross BlueShield
of North Carolina

BlueHighPerformance
NetworkSM

**PROVIDER PLAYBOOK:
BLUE HIGH PERFORMANCE NETWORKSM
(BlueHPNSM)**

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Note: Healthcare providers include hospitals, physicians and other healthcare professionals.

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KEY MESSAGES FOR PARTICIPATING PROVIDERS

BCBS SYSTEM'S NEW NATIONAL HIGH-PERFORMANCE NETWORK

On January 1, 2021, Blue Cross and Blue Shield of North Carolina (Blue Cross NC) introduced a new product in the Triad and Charlotte areas called the Blue High Performance NetworkSM (BlueHPNSM). In addition, effective January 01, 2022, BlueHPN has expanded into the Hickory and Triangle Service Areas. BlueHPN is a national quality-based network that will provide members with access to a comprehensive set of high-quality doctors, hospitals, and specialists while lowering costs for employers. More than 185 million Americans in over 65 major markets will have access to BlueHPN across the country.

PARTICIPATION IN BlueHPN

- You were specifically selected to be a BlueHPN healthcare provider because of your commitment to providing quality and affordable care to your patients. You are also in the company of a full breadth of provider types, from primary care to specialists and hospitals, because patients need access to a full range of quality care.
- When evaluating care quality, BlueHPN takes a holistic approach to assessing the quality of care of healthcare providers like you. When selecting national measures, we identified measures that align with industry-recognized standards, created a foundation and framework for continuous improvement, and accounted for regulatory and/or state mandates, to name a few.

TREATING BlueHPN PATIENTS

- As part of this select group of healthcare providers, patients will be guided to you by their employer or other BlueHPN referring healthcare providers. When you refer your patients to other BlueHPN healthcare providers, you can feel confident that they will receive the same exceptional care that you provide to your patients today. The success of this in-network only access model depends on it.

ADMINISTRATIVE EASE FOR YOU

- You can easily recognize patients with BlueHPN by the Blue High Performance name and the “Blue HPN in a suitcase” logo on the member ID card, and you can follow the same pre-service review and claims filing procedures you use today for BlueCard[®] PPO patients.

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OVERVIEW FOR PARTICIPATING PROVIDERS

Why did we create this new network?

Blue Cross NC created BlueHPN to support employer groups with their ongoing quest to improve health outcomes while keeping costs in check. On average, employer groups across America contributed to an estimated 70% of their employees' health insurance coverage, upwards of \$14,500 annually per employee in 2019¹.

Over 70 million members across all Blue Plans obtain healthcare coverage from their employer. These organizations and their employees rely on all Blue Plans to join forces with healthcare providers like you to secure the greatest value for their healthcare dollars.

This network was deliberately created to evolve over time and ensure that it continually meets the standard of a high-performance network. By sharing this commitment together, we can lead the way towards an industry-wide shift for better health outcomes and value.

BlueHPN: A True National High-Performance Network

BlueHPN is a true national high-performance network because, in addition to providing full access and affordability to members across the country, it factors in quality by including a select group of healthcare providers, like you, who are focused on better outcomes and value for your patients.

While BlueHPN is typically narrower than our broad PPO network, you are in the company of a full breadth of provider types, from primary care to specialists and hospitals in more than 65 major U.S. markets.

Please note that benefits for your BlueHPN patients are limited to urgent and/or emergent care at non-BlueHPN healthcare providers in non-BlueHPN markets.

Collaborating with Healthcare Providers

For BlueHPN to be an effective high-performance network, we knew we needed to collaborate with you and other healthcare providers, focusing on three essential components: **access, affordability, and quality.**

¹ <https://www.kff.org/report-section/ehbs-2019-summary-of-findings/>

ACCESS: Patients are searching for access to a breadth of primary care physicians, specialists and hospitals to get the high quality care they need when they need it. A full range of care required by your patients is available in each BlueHPN local market and in select markets nationwide.

AFFORDABILITY: Healthcare providers, like you, who are committed to improving efficiency and affordability were selected to be part of BlueHPN.

QUALITY CARE: When evaluating quality, BlueHPN takes a holistic approach and collaborates with healthcare providers to evaluate key categories of clinical importance. We took into consideration the needs of the population nationally and locally, prioritizing measures that address key healthcare challenges and align with community health disparities.

Defining Quality Care

In 2019, Catalyst for Payment Reform (CPR), an independent organization that helps employers and other healthcare purchasers get better value for their healthcare dollars, indicated that a “one-size-fits-all” approach to quality overlooks the variation in healthcare that can differ from community to community. CPR said, “A single set of quality and cost tests applied nationwide will either set the bar too high or too low in any particular market and ignore the opportunity to build strategic partnerships in response to each market’s specific needs.”

Blue Cross NC concurs with CPR’s point-of-view and several factors were considered when determining BlueHPN participation, including:

- **Measuring Performance Across Meaningful National and Local Quality Indicators**

On an ongoing basis, Blue Plans measure the prevalence and variation of healthcare conditions that affect most Americans’ longevity and quality of life. It is evaluated nationally, but also at the community level. For example, addressing behavioral health conditions, particularly the opioid epidemic, is imperative across all communities. Assessing the initiation and engagement of alcohol and other drug abuse or dependence is a measure that is reported nationally. For example at a local level, some Blue Plans are challenged with measles outbreaks and therefore assess immunization rates in the community, others are focused on maternal challenges and therefore focus on cesarean section rates.

- **Participating in Value-Based Care and Tying Payment to Quality Performance**

For years, Blue Plans have been leading the industry in instituting value-based care as part of a long-term solution to improve healthcare for your patients and our members, and help transform the delivery of care. By sharing data with healthcare providers, proactively providing support to better

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coordinate care, and infusing provider accountability and value into the backbone of BlueHPN, Blue Cross NC will see tangible, positive results in patient care such as improved workflows and closing gaps in care.

- Collaborating with Blue Cross NC and Being Accountable for Improving Health Outcomes**

For BlueHPN to deliver on the promise of providing high-quality care while lowering costs, it cannot remain static. A critical component of this new network is our collaboration with healthcare providers, like you, who have agreed to collaborate with us. You deliver quality care today and are committed to evolving your practices and to continue delivering quality care in the future.

- Agreeing to Provide More Efficient and Affordable Care**

To deliver a true high-performance network that both enhances quality and lowers cost, we have identified you as a healthcare provider who looks for ways to deliver care more efficiently and affordably for our members and for the employers who provide healthcare coverage.

Measuring Quality Care

Quality care is assessed via a combination of nationally consistent measures from NCQA, HEDIS and CMS Hospital Compare (Care Compare), aligned with guidance from industry organizations like CPR, America’s Health Insurance Plans (AHIP) and the American Hospital Association (AHA).

We also include market-specific local quality measures to address local gaps in care. This holistic view spans four key clinical categories and will evolve to continually influence better care delivery:

Quality Category	National Quality (Core) Measure	National Quality Data Source	NC Local Quality Measure	Blue Cross NC Local Quality Measure
1. Appropriate Care: Reduces healthcare waste and prevents patient harm	Asthma Medication Ratio	NCQA HEDIS	Medication Management in People with Asthma (75%)	NCQA HEDIS
	Use of Imaging Studies for Low Back Pain	NCQA HEDIS	Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	NCQA HEDIS
2. Best Practice Adherence: Uses evidence-based medicine	Elective delivery	CMS Hospital Compare (Care Compare)	Controlling High Blood Pressure	NCQA HEDIS
	Initiation and Engagement of Alcohol and Other	NCQA HEDIS	Pharmacotherapy Management COPD	NCQA HEDIS

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	Drug Abuse or Dependence Treatment		Exacerbation (PCE)-Bronchodilator	
3. Better Health Management: Focuses on preventing illness and better managing chronic conditions	Breast Cancer Screening	NCQA HEDIS	Child and Adolescent Well-Care Visits (AWC)	NCQA HEDIS
	Statin Therapy for Patients with Cardiovascular Disease	NCQA HEDIS	Colorectal Cancer Screening	NCQA HEDIS
4. Improved Outcomes: To improve the effectiveness of care delivered	Hospital-Wide All-Cause Unplanned Readmission Measure	CMS Hospital Compare (Care Compare)	Persistence of Beta-Blocker Treatment after a Heart Attack	NCQA HEDIS
	Methicillin-resistant Staphylococcus Aureus (MRSA) Blood Infections	CMS Hospital Compare (Care Compare)	National Healthcare Safety Network (NHSN): Clostridium difficile	CMS Hospital Compare (Care Compare)

Greater value can be achieved through collaborating with you to examine clinical measures that offer a significant potential to close gaps in healthcare while providing the support and tools you need.

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OPERATIONAL PROCEDURES

Connecting Patients To BlueHPN Healthcare Providers

BlueHPN patients will primarily use the online “Find a Doctor” tool to locate in-network BlueHPN healthcare providers. When BlueHPN patients search for healthcare providers using their member ID card or number, only BlueHPN healthcare providers will be returned in the search.

Blue Cross NC contracts with health care providers to be in BlueHPN. Your office manager or contracting manager/representative will have information on the networks you participate in, including BlueHPN.

As a BlueHPN health care provider, your practice will appear on our online “Find a Doctor” tool when a provider search is done in your geographic area. If you would like to confirm this, we can instruct you on how to conduct a search using the “Find a Doctor” tool, or please reference the instructions below. Please contact the Provider Blue Line at 800-214-4844 if you need additional assistance.

“Find a Doctor” Tool Instructions:

- a. Click link [Find a Doctor](#) from any page on BlueCrossNC.com.
- b. Select one of the following options to initiate the provider search.
 - Individuals, Families & Groups
 - Dental
 - Medicare
- c. Choose the [Blue High Performance Network plan](#) from the drop-down box options.
- d. Once the plan has been selected, determine the appropriate tile for your search – [Provider](#), [Facility for Medical Care](#), [Dental Care](#), or [Urgent Care](#) – and select the appropriate tile accordingly.
- e. The next screen will show a Browse by Category button, as well as a Search field.
- f. [Click](#) the Browse by Category button to reveal a clickable menu, or you also have the option of a keyword search in the Search field.
- g. If using the search field, type your practice or provider name in the search field. Once the name is typed, press enter or select the provider if auto-populated.
- h. Once you have selected your practice or provider name that meets your search, [click](#) on the provider name to find more details on the profile, and verify BlueHPN par status under the plans accepted section. If not using the search field, the steps below outline directions to browse by Medical Speciality.
- i. [Click](#) the appropriate item that suits your practice (e.g., Medical Specialties).
- j. [Click](#) the appropriate medical speciality (e.g., Specialist).
- k. [Click](#) the appropriate specialist category (e.g., Dermatology). Each item represents a group of certain types of providers.
- l. Select the item that appropriately suits your needs. A listing of the selected specialists appears. This list can span multiple pages.

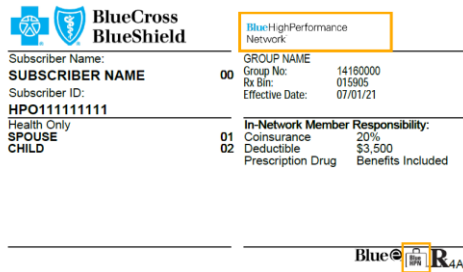
Note: Healthcare providers include hospitals, physicians and other healthcare professionals.

- m. Once you have selected the type of provider that fits your search, click on the provider to find more details on their profiles, and verify BlueHPN par status under the plans accepted section.

Recognizing BlueHPN Patients

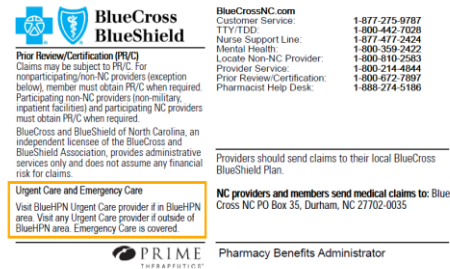
A BlueHPN patient can easily be identified by their member ID card. The Blue High Performance Network name will be prominently displayed on the front of the member ID card, along with the “BlueHPN in a suitcase” logo. This “BlueHPN in a suitcase” logo indicates that BlueHPN rates apply. If you don’t see the Blue High Performance Network name or the “BlueHPN in a suitcase” logo on the front of the member ID card, then the patient is not in BlueHPN, and other rates apply.

FRONT OF MEMBER ID CARD



*Some Host BlueHPN member IDs have some differences from the card depicted. The cards will have the BlueHPN product name.

BACK OF MEMBER ID CARD



Checking Eligibility and Benefits

Checking patient eligibility and benefits will be done the same way you do today for BlueCard PPO members by either submitting a HIPAA 270 eligibility and benefit request transaction or by calling 1-800-676-BLUE. We will indicate that the patient is part of BlueHPN and the appropriate member cost-share on the eligibility and benefit response you typically receive from us. Because of your status as a BlueHPN healthcare provider, you will apply the in-network cost-share. Please note that some plans are co-pay plans, and others may be co-insurance plans.

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Medical Benefit	Place of Service	Covered Services
Participating BlueHPN Provider		
Preventive Care	Inside BlueHPN Svc Area	Yes
Routine Care		
Urgent Care		
Emergency Care		
Non-Participating BlueHPN Provider		
Emergency Care	Inside BlueHPN Svc Area	Yes
Preventive Care	Inside BlueHPN Svc Area	No
Routine Care		
Urgent Care		
Urgent Care/Emergency Care	Outside BlueHPN Svc Areas	Yes
Preventive Care	Outside BlueHPN Svc Areas	No
Routine Care		

Recommending Other BlueHPN Healthcare Providers to Patients

BlueHPN is a national high-performance network, offering a full-range of healthcare providers, including acute care facilities, primary care providers and all relevant specialty types, including ancillary services. However, not all healthcare providers are included in BlueHPN. **It is important when your BlueHPN patients need to see a specialist or another healthcare provider that you only recommend other**

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BlueHPN healthcare providers to ensure the patient will have full benefits. . You can use the Find a Doctor tool from any page on BlueCrossNC.com to identify other BlueHPN healthcare providers who are also committed to delivering high quality care and cost-efficiency.

If a BlueHPN patient needs to receive care for a specific medical reason from a non-BlueHPN specialist or hospital, please contact the Provider Blue Line at 800-214-4844 before referring the patient to the non-BlueHPN healthcare provider. It is always our priority for the BlueHPN patients to get the care they need.

Filing BlueHPN Patient Claims

The claims submission procedures you follow for BlueCard PPO patients will be exactly the same for BlueHPN patients. Local and out-of-area claims are to be submitted to Blue Cross NC just as you do today. You may also leverage existing tools and procedures for checking the claims status and performing pre-service review.

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WHAT NON-PARTICIPATING BlueHPN HEALTHCARE PROVIDERS NEED TO KNOW

BlueHPN is currently closed to network additions. When the anchoring health systems and Blue Cross NC developed these networks, we did an intensive analysis of network adequacy, accessibility, and marketability, incorporating both CMS and NCDOI guidelines. We review network adequacy for each product annually. If you have further questions or concerns, please call Provider Blue Line at 800-214-4844.

BlueHPN patients will only have full benefits when receiving care from BlueHPN-contracted healthcare providers. When receiving care from non-BlueHPN healthcare providers, benefits will be limited to emergent care in areas of the country where BlueHPN healthcare providers are available, and to urgent and emergent care in areas of the country where no BlueHPN healthcare providers are available.

Recognizing BlueHPN Patients

You will be able to identify BlueHPN patients by their Blue Cross and Blue Shield member ID card. The Blue High Performance Network name will be prominently displayed on the front of the ID card, along with the “BlueHPN in a suitcase” logo. In addition, benefit limitations will be indicated on the back of the member ID card with the following disclaimer:

Benefits limited to emergent care at non-BlueHPN providers within BlueHPN product areas. Benefits limited to urgent and emergent care at non-BlueHPN providers outside of BlueHPN product areas.

Since you are not a BlueHPN healthcare provider, be aware that the only services covered for BlueHPN patients are emergent care within BlueHPN MSA and urgent and emergent care outside of BlueHPN MSA. You will be reimbursed for these limited benefits according to your Blue Cross NC provider contract. All other services are considered out-of-network, indicating a 100% member liability on the eligibility and benefit response. Therefore, the patient needs to be informed that they will need to pay 100% of the cost-share.

Allowance for Covered Services

Coverage for services to BlueHPN members by providers that are not contracted to be in-network for BlueHPN will be subject to eligibility and available member benefits. The CMM/Indemnity/Traditional allowance will be applied and accepted by the provider for that service for local and host BlueHPN members unless a separate or more specific allowance has been negotiated with that provider.

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