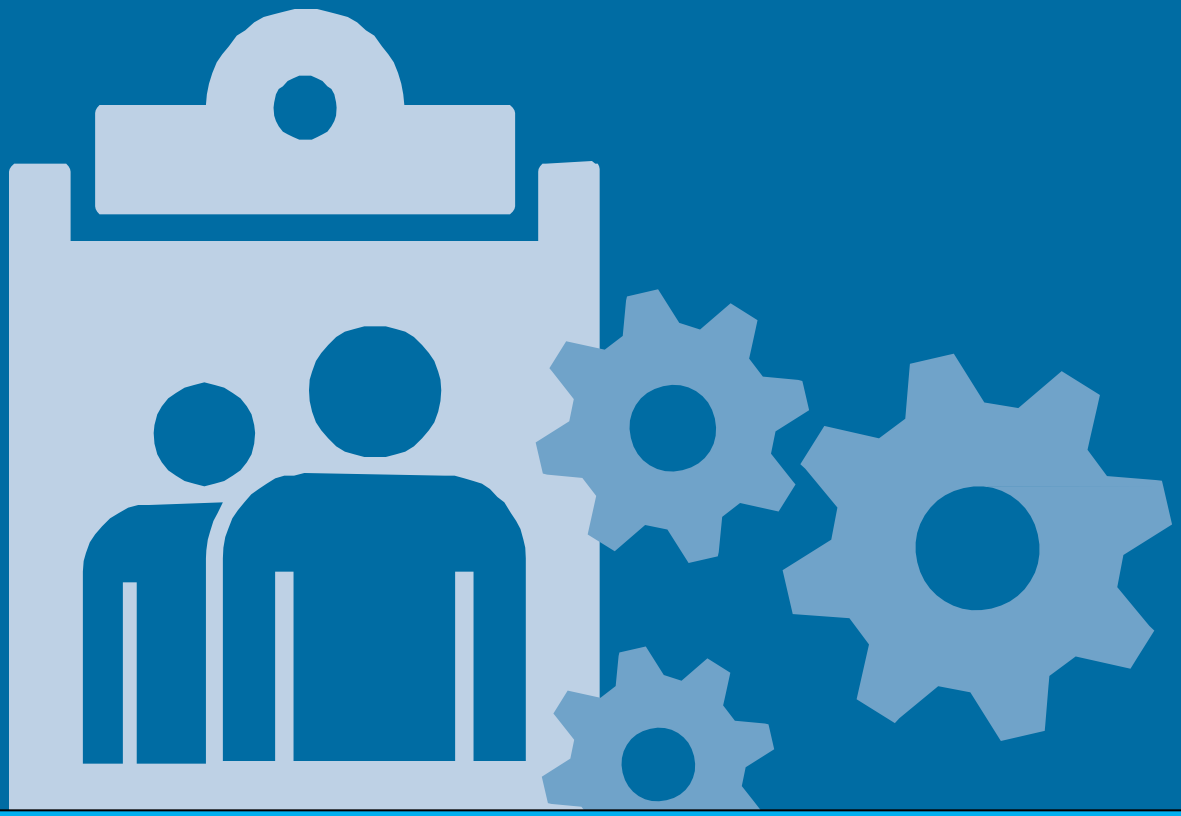
REFERENCE GUIDE OF HIGHMARK MEMBER PROGRAMS

2022



HIGHMARK.

Programs and Services for Highmark Members

The Reference Guide of Highmark Member Programs is a catalog for health care providers. It is designed to assist in understanding the full range of programs and services available to Highmark members. It contains useful information and resources to give providers a comprehensive understanding of the programs offered to Highmark members within all service areas and for all lines of business. Providers should be aware that if programs are discontinued or additional information becomes available, the catalog will be updated accordingly. Also, coverage for each program may vary based on member benefits and providers should encourage members to consult their benefit documentation for coverage details. Highmark encourages providers to identify members who can benefit from Highmark programs and services. Please use the 'Case Management Referral and Inquiry' link available via NaviNet® to submit a referral electronically for programs unless other enrollment information is stated in the description.

Clinical Care & Wellness Services	*Line of Business*				*Region**	
	Commercial	Medicare Advantage	ACA	PA	WV	DE
CLINICAL CARE						
Complex Case Management (CCM) This program is appropriate for an adult or pediatric member who has both complex medical conditions and high utilization, often accompanied by intensive service coordination and/or psychosocial support needs. It is a condition non-specific program by design and seeks to engage members based on the above criteria to reduce unnecessary inpatient admissions and emergency department visits. Registered nurse case managers work to coordinate care through a primary care provider (PCP) and provide education about other resource options, such as urgent-care and walk-in clinics. The program utilizes a multidisciplinary care team approach, which fosters collaboration and enhances coordination between Utilization Management, Case Management, Disease Management, Pharmacy, Behavioral Health, Social Work, Wellness, Medical Directors, and Providers through referral and consultation to meet member needs more fully.	▮	▮	▮	▮	▮	▮
Personal Wellness Coaching Personal Wellness Coaching is individual telephonic lifestyle coaching with a wellness coach who is a clinically trained Registered Dietitian, Exercise Physiologist or health and wellness professional. Coaches work one-on-one with members to support, educate, and empower them to improve their health through lifestyle changes.	▮	▮	▮	▮	▮	▮

*Lines of business may vary by region

Clinical Care & Wellness Services	Line of Business				Region*	
	Commercial	Medicare Advantage	ACA	PA	WV	DE
CLINICAL CARE						
Blues On Call Registered Nurse Advice line that reviews member clinical symptoms and provides recommendations for the appropriate site of care. Available 24/7 to support members* with clinical questions or concerns. *Not available to FEP members.	▮	▮	▮	▮	▮	▮
Telemedicine Highmark partners with national telemedicine vendors including American Well, Doctor on Demand, DermatologistOnCall and Teladoc Health to offer Commercial and ACA members access to telemedicine services. (Vendor coverage varies, and members should consult their benefit documentation for coverage details and cost-share information.) In addition, Highmark supports in-network providers and their patients through coverage of select telemedicine claims. See the Highmark Provider Resource Center for details on covered claims/services.	▮		▮	▮	▮	▮
Transition of Care(TOC) This program identifies members who are scheduled for certain inpatient hospital procedures for pre-op and post-discharge outreach calls, as well as any member who may have an unplanned admission to the hospital who is discharged to a home setting. The primary focus of this program is to perform assessment of the 4 Pillars of the Care Transitions Program® to support members and family during care transition, when they are most vulnerable to care errors. These pillars include Medication Self-Management, Red Flags, PCP Follow-up, and Dynamic Patient-Centered Health Record.	▮	▮	▮	▮	▮	▮
Clinical Pharmacist Outreach For pharmacy-related issues, our clinical pharmacists may provide targeted outreach to members and physicians for issues regarding specialty drugs (e.g. chemotherapy and pulmonary hypertension), high number of prescription drugs, potential drug interactions and possible alternatives or formulary issues.	▮	▮	▮	▮	▮	▮
Baby Blueprints The Baby Blueprints Program provides tools, education, information, and ongoing support to members throughout all stages of their maternity experience. Personalized support is offered by Women's Health Specialists, and the program encourages women to take a more proactive role in their health during pregnancy and helps to support positive outcomes for both mother and baby.	▮		▮	▮	▮	▮

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	Commercial	Medicare Advantage	ACA	PA	WV	DE
SPECIALTY CASE MANAGEMENT						
High Risk Pregnancy The High Risk Pregnancy program addresses the risks and needs of women planning a pregnancy. These women may have a history of high-risk pregnancy or may be at higher risk for complications secondary to fertility planning and treatments or other comorbidities such as asthma, diabetes, depression, or chronic pain and/or SDoH needs. Assessment covers the prenatal period and the 4th trimester/ postpartum period to allow for support for the mom during pregnancy and after she is home with the new baby. Members are screened and referrals can be made to internal behavioral health specialists for post-partum depression if needed. Support is also provided by our Social Work and Wellness teams for pregnancy nutrition and identified social needs.	▮		▮	▮	▮	▮
Specialty Pediatrics/Neonates This program is appropriate for a neonate or pediatric member who has both complex medical conditions and high utilization, often accompanied by intensive service coordination and/or psychosocial support needs. It is member-specific to complex conditions that arise in those members from birth to age 18 and seeks to engage members based on the above criteria in an attempt to reduce unnecessary inpatient admissions and emergency department visits. The program utilizes a multidisciplinary care team approach which is designed to foster collaboration and enhance coordination between Utilization Management, Case Management, Disease Management, Pharmacy, Behavioral Health, Social Work, Wellness, Medical Directors, and Providers through referral and consultation to meet member needs.	▮		▮	▮	▮	▮
Transplant This case management program is appropriate for an adult or pediatric member who has both complex medical conditions and high utilization, often accompanied by intensive service coordination and/or psychosocial support needs. It is a condition-specific program for all solid organ transplants as well as bone marrow and stem cell transplants that encourages and facilitates use of Blue Distinction Centers for Transplant and seeks to engage members based on the above criteria in an attempt to reduce unnecessary inpatient admissions and emergency department visits.	▮	▮	▮	▮	▮	▮

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Clinical Care & Wellness Services	Line of Business				Region*	
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SPECIALTY CASE MANAGEMENT						
Inflammatory Bowel Disease This program focuses on a plan of care for adults and children diagnosed with inflammatory bowel disease (Ulcerative Colitis and Crohn's). Emphasis is placed on issues critical to IBD management, such as identification of the member's current level of disease control by assessing frequency of bowel movements, blood in stool or episodes of diarrhea, extended use of corticosteroids, the number of ER or urgent care visits or hospitalizations, the extent to which symptoms affect daily activity, SDoH factors and the results of tests specific to IBD. Outreach is triggered for decreased utilization of PCP and/or no specialist, and/or non-adherence to treatment regimen.	▮	▮	▮	▮	▮	▮
Oncology This case management program is appropriate for an adult member who has been diagnosed with a complex cancer (Hematologic, Brain, Lung, Colon, Pancreatic) or with cancer and other complex medical conditions and/or high utilization, often accompanied by intensive service coordination and/or psychosocial support needs. It is a condition-specific program for complex cancer that seeks to identify members early in their cancer journey and engage with the member to reduce unnecessary inpatient admissions and emergency department visits and support members throughout their cancer journey (e.g., treatment plan, palliative care/hospice, remission).	▮	▮	▮	▮	▮	▮
Specialty Pediatric Asthma This program focuses on a plan of care for children diagnosed with asthma. Emphasis is placed on issues critical to asthma management, such as identification of the member's current level of disease control by assessing current treatment plan, asthma symptom frequency, use of relief medications, number of ER or urgent care visits or hospitalizations, the extent to which asthma symptoms affect daily activity, SDoH factors, caregiver knowledge/support and overall knowledge of disease management including triggers and prevention of exacerbations. Outreach is triggered for new asthma diagnosis/prescription, SDoH factors, decreased utilization of PCP/Specialist, and/or non-adherence to treatment regimen.	▮		▮	▮	▮	▮

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BEHAVIORAL HEALTH						
Behavioral Health Case Management This program is appropriate for children, adolescents, and adult members with mental health and/or substance use disorder case management needs. Conditions associated with this program might include (but are not limited to): bipolar disorders, anxiety disorders, depressive disorders, substance use disorders, eating disorders, and schizophrenia or other psychotic disorders. Member engagements range from behavioral health coaching and complex-case management to care coordination. Highmark's Behavioral Health Specialists are licensed behavioral health professionals. They conduct a comprehensive member needs assessment and establish a member focused case management plan of care. Plan of care goals include: the development of self-management skills (member and family), identification and resolution of barriers to care, adoption of positive behavioral change (member and family), engagement with evidence-based treatment, adherence to prescribed medications, successful care coordination, and identification and utilization of community-based resources.	▮	▮	▮	▮	▮	▮
Behavioral Health High Acuity Team (BHAT) This team provides holistic case management services for members* with a major depressive diagnosis or opiate use diagnosis and a comorbid chronic physical issue. *Not available to FEP members	▮	▮	▮	▮	▮	▮
Depression Program This program is designed to help members manage depressive specific symptoms / conditions / disorders. Highmark Behavioral Health Specialists are licensed behavioral health professionals offering practical and confidential member engagements to help identify symptoms of depression, overcome ambivalence to care, decide what kind of treatment might be right, manage any obstacle to care, and track treatment progress. A member's course in the program is determined by a member specific case management plan of care.	▮	▮	▮	▮	▮	▮
Behavioral Health MOMS (Maternal Opioid and Mental Health Support) This program provides care for pregnant members* with a mental health or opioid use diagnosis. *Not available for FEP members	▮		▮	▮	▮	▮

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BEHAVIORAL HEALTH						
Well 360 Virtual Health (powered by AmWell) Telehealth mobile and web platform connects Highmark members with doctors over video feed (within 24-48hrs) for live, video visits and handles all the administration, security, and record keeping services – adult and pediatric virtual Behavioral Health visits require an appointment. Appointments are available within approximately one week. This visit requires an applicable copay/coinsurance as noted by the coverage of the member. Therapy Ages 10+ Medication Management 18+ Self-Referral: https://well360virtualhealth.com/landing.html Self-Referral AHN: 412-DOCTORS (appointment line) AHNVirtualHealth.org *Not available for FEP members	▮	▮ (DE Only)	▮	▮	▮	▮
Bright Heart Health A telemedicine program for addiction medicine services. Multi-disciplinary team approach with 4 subsets for treatment: SUD -Therapy, MAT, counseling; Mental Health outpatient care - counseling, dietitians, and physicians; Eating disorders - IOP; Pain Management - chronic pain management program + med and non-med therapy for pain and Opioid Use Disorder. This program is available for members 18 years and older*. Self-Referral: 1-800-892-2695 or https://www.brighthearthealth.com/virtualclinic Provider Referral: 1-800-892-2695 or https://www.brighthearthealth.com/intake-forms/patient-referral *Not available for FEP members	▮	▮	▮	▮	▮	▮
NOCD NOCD is a telehealth provider that specializes in obsessive-compulsive disorder (OCD). NOCD provides Highmark members with live one-on-one video therapy with Exposure and Response Prevention (ERP)-trained therapists, access to a peer community and a personalized self-management tool. This program is available for members 5 years and older*. Self-Referral : 312-766-6780 or www.treatmyocd.com Provider Referral: 312-766-6780 or www.treatmyocd.com or email care@nocdhelp.com *Not available for FEP members	▮		▮	▮	▮	▮
MERU 12-week mid/moderate digital therapeutic program for Highmark members with depression and anxiety. The online solution combines licensed therapists and psychiatrists, a smartphone-based treatment program, a biofeedback wearable, and anonymous peer-support groups. This program is available for members 18 years and older*. Self-Referral: www.meruhealth.com/highmark Provider Referral: www.meruhealth.com/highmarkprovider *Not available for FEP members	▮		▮	▮	▮	▮

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BEHAVIORAL HEALTH						
RIA Health RIA Health is a telehealth medical practice that focuses on treating Alcohol Use Disorder through a harm reduction model by combining medically assisted treatment with digital tools to help Highmark members track and record progress. The individual care team includes addiction medicine physicians, psychiatric nurse practitioners, psychiatrists, certified addiction counselors and social workers. This program is available for members 18+ years. *Not available for FEP members Self-Referral: 1-866-260-5635 or www.riahealth.com/Highmark Provider Referral: 1-866-260-5635 or www.riahealth.com/Highmark	▮	▮	▮	▮	▮	
Freespira This program is a revolutionary, medication-free digital therapy that reduces or eliminates symptoms or panic disorder, attacks and PTSD by training users to normalize respiratory irregularities. Members receive a breathing sensor and digital tablet. This program is covered by DME benefit for Highmark members and copays and coinsurances apply. This program is available for members 18 years and older*. Self-Referral: https://get.freespira.com/start-today-lgp/ Provider Referral: https://get.freespira.com/highmark-referral/ or 1-800-530-9380 *Not available for FEP members	▮		▮	▮	▮	▮
MAP Healthcare MAP Health is a 12-month telehealth peer support program where Highmark members receive approximately 2-4 sessions with a MAP Peer Recovery Support Specialist per month and have the support of a digital platform. This program addresses Substance, Alcohol and Opioid abuse, peer recovery and generalized behavioral health. Available for members 13 years of age and older*. Self-Referral: 1-844-627-1449 Provider Referral: https://www.thisismap.com/provider-referrals *Not available for FEP members	▮		▮	▮		

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BEHAVIORAL HEALTH						
Wayspring Peer recovery is an additional layer of support to enhance and reinforce other services. It can be used with other treatment, not serve as a replacement. This program addresses substance, alcohol and opioid use with peer recovery. Members will receive a Peer Recovery Specialist who will provide ongoing support as a guide towards long term recovery by mentoring him or her through the treatment program. This program is available to members 18 years and older*. Self-Referral: 412-214-8325 or www.wayspring.com/for-members or email accessrecovery@axialhealthcare.com Provider Referral: 412-214-8325 or email accessrecovery@axialhealthcare.com	▮	▮	▮	▮		
Tempest Intensive digital outpatient/group therapy recovery program for treatment of alcohol use. The digital platform offers Highmark members counseling, virtual support groups, online courses, and certified peer recovery coaching to support and maintain recovery. This program is available to members 18 years and older. *Not available for FEP members Self-Referral: support@jointempest.com Provider Referral: support@jointempest.com	▮	▮	▮	▮		
Joon Teletherapy provider specializing in mental health care for teens and young adults. Members have live psychotherapy video visits and access to digital tools through a mobile app. Joon provides support for parents, including family counseling, articles and additional resources. This program is available to members ages 13-24. Self-Referral: 412-219-9290 or https://www.joon.com/highmark Provider Referral: 412-219-9290 or email Highmark-support@joon.com	▮		▮	▮		

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DISEASE MANAGEMENT						
Disease Management Highmark members have the advantage of a clinically focused, member-centric disease management program, which is fully integrated with our case and utilization management and lifestyle programs. A multidisciplinary team helps members engage in the behavior change process to better manage their specific condition(s) and overall health.	▮	▮	▮	▮	▮	▮
Asthma This program focuses on a plan of care for adults and children diagnosed with asthma that includes assessment questions specific for the three age groups recommended by the Expert Panel from the National Asthma Education and Prevention Program (NAEPP). Emphasis is placed on issues critical to asthma management, such as identification of the member's current level of asthma control by assessing daytime and nighttime asthma symptom frequency, excessive use of relief medications, the number of ER or urgent care visits or hospitalizations, the extent to which asthma symptoms affect daily activity, and the results of pulmonary function tests.	▮	▮	▮	▮	▮	▮
Coronary Artery Disease (CAD) This program is for the adult member diagnosed with CAD. Other conditions or diseases considered risk factors for CAD or that contribute to the risk for disease related complications — such as myocardial infarction, atrial fibrillation, diabetes, stroke, or carotid artery disease — are also assessed in this program. Vascular disease assessment is expanded to address venous and arterial insufficiency separately. This program focuses on the proper management of CAD, provides education regarding the disease process with emphasis on healthy lifestyle changes and self-management, and provides appropriate interventions with the goal of preventing avoidable adverse health outcomes and decreasing hospitalizations.	▮	▮	▮	▮	▮	▮
Congestive Heart Failure (CHF) This program is appropriate for the adult member diagnosed with CHF. Assessments focus on the following: symptom assessment and provider monitoring, the New York Health Association (NYHA) Classification of Heart Failure and stage-related effects on activities of daily living, strict medication, fluid restriction adherence, and careful management of comorbidities. Methods supporting the member's self-management serve to minimize symptoms, avoid hospitalizations and readmissions, and improve the member's quality of life. The program includes updates from the American Heart Association and the American College of Cardiology and Focused Update: ACCF/AHA Guidelines for the Diagnosis and Management of Heart Failure in Adults.	▮	▮	▮	▮	▮	▮

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DISEASE MANAGEMENT						
Chronic Obstructive Pulmonary Disease (COPD) This program focuses on the proper management of this chronic condition in an attempt to decrease ED visits and hospitalizations by helping the member successfully manage the disease and its symptoms. Based on the Global Initiative for Chronic Obstructive Lung Disease (GOLD) standards, questions are included that assess the member's specific symptoms, risk factors, systemic effects, and the impact the disease has on the member's everyday activities. Common comorbid conditions that may impact the member with this condition are assessed as part of the treatment plan.	▮	▮	▮	▮	▮	▮
Metabolic Syndrome This program is appropriate for adult members with an increased risk of cardiovascular events due to factors historically evaluated individually, such as increased abdominal girth, elevated fasting blood sugar and triglyceride levels, low HDL levels, pre-hypertension, and smoking history. It provides education and support for members who need to address the specific risk factors that separately may not appear to be significant but, when combined, create a significant potential for a cardiac event and type 2 diabetes.	▮			▮	▮	▮
Musculoskeletal This program is appropriate for adults with acute or chronic low back pain, rheumatoid and osteoarthritis pain, and other musculoskeletal pain that can be the result of a disease process or an injury. The aim of this program is to optimize members' adherence to follow-up care or therapy and to help members relieve or manage their musculoskeletal pain to return to their prior level of functioning. New to this program is a section focusing exclusively on low back pain, its cause, treatment, and assessment of its impact on work and activities of daily living. The program's questions ensure members are assessed for appropriate testing, services, and care they need to manage pain.	▮			▮	▮	▮
Blue Card Advantage, a Value-Based Insurance Design (VBID) (CMS Pilot) Highmark introduced Blue Care Advantage in 2017, a Medicare Advantage Value-Based Insurance Design pilot program that has been approved by the Centers for Medicare and Medicaid Services (CMS). Blue Care Advantage promotes better health to Security Blue HMO-POS ValueRx members living with diabetes and/ or COPD. Eligible members are automatically enrolled (opt-out program). Examples of these enhanced benefits include, but are not limited to, four (4) waived Specialist Visit copays, transportation benefits, diabetics receive their retinal exams for no cost, one periodontal visit for scaling and rooting, etc. Providers in the following specialties in the Security Blue HMO-POS ValueRx network will be designated as a Blue Care Advantage Preferred Specialist: Cardiology, Endocrinology, Ophthalmology, Nephrology, Pulmonary Disease, and Podiatry. *Only available in the following counties: Allegheny, Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Lawrence, Washington, Westmoreland		Security Blue Value RX		*WPA		

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DIABETES PROGRAMS & SERVICES						
Diabetes This program is appropriate for adults or children diagnosed with either diabetes type 1 or type 2. Questions center on the current treatment plan, frequency of appropriate testing, and disease-related complications. The program reflects the current American Diabetes Association recommendations for target A1C values, annual eye and foot exams, and blood glucose monitoring (including continuous glucose monitoring). A pediatric diabetes questionnaire incorporates the growth and development needs of a pediatric member with diabetes.	▮	▮	▮	▮	▮	▮
Diabetes Prevention Program Highmark has partnered with the YMCA to bring our members a Diabetes Prevention Program that is covered at 100 percent as a preventive benefit with no member cost share. Contract holders and their covered dependents age 18 and older who meet program eligibility requirements can participate in the program. Members can take part in coaching sessions held at local participating YMCAs and participating network facilities. A trained lifestyle coach guides sessions that include eating healthier, increasing physical activity, and losing weight. To enroll, members can call the Member Services number located on the back of their insurance card.	▮	▮	▮	▮	▮	▮
Well 360 Diabetes Management, powered by Onduo A virtual diabetes care program with tools, coaching and clinical support to help patients manage Type 2 Diabetes. It provides testing supplies and monitors to participants, including Continuous Monitors (CMGs) to those who qualify. It is a member driven solution and can help to remotely support patients with its Virtual Diabetes Clinic, where individuals who require frequent support but no in-person care, can access high-quality, evidence-based support. It utilizes a virtual model that includes access to telehealth services with endocrinologists and other care providers. The solution does not replace the primary medical relationship that a patient has with the PCP but provides support between visits to help promote self-management. *Not available for FEP members **Member self-enrolls	▮	▮	▮	▮	▮	▮

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WELLNESS & PREVENTION						
BLUE 365 Member Discount Program This program is an online national discount directory that gives members exclusive access to discounts and savings from leading national companies. Discount categories include fitness, nutrition, hearing, vision, massage, acupuncture, chiropractic, etc. Members can access information regarding these type of programs on the Highmark member website by selecting Member Discounts and clicking on Blue365 Discounts.	▮	▮	▮	▮	▮	▮
Fitness Your Way One of the Blue365 member discounts is Fitness Your Way by Tivity Health. The offering allows eligible members to join a network of fitness facilities nationwide at a discounted rate so they can work out anywhere when it's convenient for them (Tivity membership fees apply). Fitness Your Way also offers On-demand videos 24/7 and live virtual classes led by wellness professionals.	▮	▮	▮	▮	▮	▮
Sharecare This is a digital health solution that delivers personalized health and wellness information that empowers members to stay healthy and meet their wellness goals. Some of the key features include daily trackers, RealAge® test that assesses a variety of behaviors and existing conditions to show the true age of one's body, and a personalized health profile which provides each participant with easy access to the evolving story of their health through their health data. Members can communicate directly with Wellness Coaches, Case and Disease Managers and Social Workers from their health plan directly within the application. Eligible members can register at https://mycare.sharecare.com to take advantage of these features. Once registered, they can also download the Sharecare app for iOS or Android. Employers can also opt in to encourage participation through reward programs.	▮		▮	▮	▮	▮
Silver Sneakers Exercise benefit for Medicare Advantage members providing free membership to health fitness centers		▮		▮	▮	▮
Welltok All Highmark Medicare Advantage members are automatically enrolled in the Highmark Passport Rewards Program and can earn rewards for completing certain preventive tests and screenings that are on their Personalized Wellness Program. All Highmark Medicare Advantage members will be mailed a Personalized Wellness Plan that includes the list of preventive tests and/or screenings that they should complete throughout the year that can help them stay healthy, avoid, or delay the onset of disease, and keep current disease(s) from becoming worse or debilitating. Highmark will update members on their progress throughout the year so that they can see the preventive steps they have completed so far and the ones that are still open. Members can access their wellness plan via an online portal to track and monitor their progress.		▮		▮	▮	▮

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COMPREHENSIVE LIFESTYLE PROGRAMS						
Aim for Change The Aim for Change program is designed to help members learn about healthy eating basics, the value of physical activity and how both nutrition and physical activity are key components for successful long-term weight management and improved health. This program also addresses a member's barriers to change and helps guide and position them for success.	▮	▮	▮	▮	▮	▮
Daily Steps to Less Stress The Daily Steps to Less Stress Program is a stress awareness program designed to help members build skills and learn techniques that can help them cope with and balance life's day-to-day ups and downs. Members can engage with an experienced coach to assess their levels of stress, recognize areas for improvement, learn proven strategies to cope with stress and become more stress-resilient.	▮	▮	▮	▮	▮	▮
My Weight Management Journey This comprehensive program guides members on how to begin their weight management journey and build the skills to maintain long term success. Members will work with an experienced coach to learn how to choose the right nutrition approach for them, mindful eating skills, build an activity plan and overcome personal barriers that influence weight loss.	▮	▮	▮	▮	▮	▮
How To Be Tobacco-Free The program is designed for anyone using tobacco – cigarettes, cigars, e-cigarettes, or chew – and want to quit. Members will work with a Tobacco Treatment Specialist to understand their nicotine dependence, identify triggers, cope with withdrawal symptoms, cravings, and stress, and set a personalized quit plan to become tobacco free.	▮	▮	▮	▮	▮	▮
Time to Sleep Well The Time to Sleep Well Program is a sleep awareness program where members can learn techniques and effective tools to help improve the quality of their sleep. Members can engage with an experienced coach to assess their sleep patterns, recognize areas for improvement and learn proven strategies to improve their sleep.	▮	▮	▮	▮	▮	▮

*Lines of business may vary by region

Clinical Care & Wellness Services	Line of Business			Region*		
	Commercial	Medicare Advantage	ACA	PA	WV	DE
SOCIAL WORK & SOCIAL DETERMINANTS OF HEALTH (SDoH)						
Social Support This program focuses on assisting members who are experiencing difficulties in areas of their life that can impact their health, well-being, and access to care. Licensed, master's-level social workers will telephonically partner with members to conduct a complete needs assessment, explore Social Determinants of Health (SDOH) that may be barriers to their care, and develop a plan to explore and contact agencies, resources, and programs that may be of assistance. Areas where the social work team can assist may include: financial concerns related to food/rent/ mortgage/utilities; housing and placement difficulties — instability, homelessness, adaptations (ramps, safety), level of care (skilled, custodial, assisted living); transportation challenges — lack of vehicle or driver for medical and non-medical needs; caregiver support or care planning needs; income, employment or insurance concerns and questions; financial difficulties related to medication costs, copays, medical bills; end of life decisions — POA, Living Will, palliative/hospice care; and discharge planning.	▮	▮	▮	▮	▮	▮
Community Support Platform An on-line resource and referral platform that assists members with finding free or reduced-cost services in their community. Members can search for local support resources to access food, housing, transportation, utility assistance, medical care, job training and more. www.highmarkcommunitysupport.com	▮	▮	▮	▮	▮	▮
My Care Navigator This program assists members in complex and unique provider searches as well as narrow network products as they relate to provider participation status. The My Care Navigator program will also assist members with Medical Record transfers, scheduling appointments including assisting members with virtual provider visits. Members can call 1-888-258-3428 to access this service.	▮	▮	▮	▮		

*Lines of business may vary by region

Clinical Care & Wellness Services	Line of Business			Region*		
	Commercial	Medicare Advantage	ACA	PA	WV	DE
SOCIAL WORK & SOCIAL DETERMINANTS OF HEALTH (SDoH)						
NEMT Benefit Medicare Advantage members are eligible for 24 one-way trips within 50 miles to and from medical appointments. Transportation modes are stretcher vans, wheelchair vans, sedans and Lyft.		▮		▮	▮	▮
PALS (People Able to Lend Support) PALS is a volunteer program providing non-medical help to members with Highmark medical coverage and Medicare. Carefully screened and trained PALS volunteers lend a hand with everyday activities, such as grocery shopping and simple household chores, even friendly phone calls and home visits. Volunteers give extra support to people, possibly even helping them to continue living independently in their own homes.		▮		▮	▮	
Postpartum Food Box Delivery Program The State of Delaware has partnered with ModivCare Transportation and The Food Bank of Delaware to support postpartum members who may benefit from receiving nutritional assistance. Members who recently gave birth may be eligible to receive up to two (2) FREE boxes of non-perishable food items per week, and diapers/wipes as available. Members must register for the program within 8 weeks of the birth of their newborn and are eligible to receive a total number of eight (8) weekly deliveries, not to surpass 12 weeks postpartum.	▮					▮
Transportation Assistance Transportation resources may be available for Highmark members based on their line of business and area of residence (annual trip limits and mileage radius may be applicable). One example, Access2Care is a ride assistance program that provides non-emergency transportation for Medicare Advantage members.	▮	▮	▮	▮	▮	▮

*Lines of business may vary by region

Clinical Care & Wellness Services	Line of Business				Region*	
	Commercial	Medicare Advantage	ACA	PA	WV	DE
POST-ACUTE CARE SERVICES						
Healing at Home Members who have a documented chronic condition of cardiovascular disorders, CHF, chronic lung disorders, stroke, cancer, ESRD, dementia and who have been discharged from the hospital to home are eligible to receive 28 hours of non-skilled (personal care) service in the home, reduced co-insurance on DME, 2 weeks of meal delivery service in addition to all the standard benefits including traditional home health. *Only available in the following 11 counties in SWPA: Allegheny, Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Lawrence, Washington, and Westmoreland		▮		✈▮		
Medicare Advantage Post Discharge Food Program Medicare Advantage members who are discharged from the hospital to home are eligible to receive 28 frozen, prepared meals over two weeks. There is no cost to the member and the meal options include low sodium, low sugar, kosher, and halal choices.		▮		▮	▮	▮

*Lines of business may vary by region

The Highmark Member Programsare offered for the providers' consideration and assessment, are not required by Highmark (other practices may be more suitable for the provider) and are not to be viewed as a cause or basis of success under any pay for value program. The provider's medical judgment must remain independent. Highmark shall not be liable for any adverse effects or consequences resulting from a provider's referral of a member to a Highmark Member Program set forth in this catalogue. Highmark is also not recommending particular treatments or health care services, and the Highmark Member Programs are not intended to be a substitute for professional medical advice, diagnosis, or treatment.

Clinical Care & Wellness Services	Line of Business				Region*	
	Commercial	Medicare Advantage	ACA	PA	WV	DE
IN-HOME SUPPORT SERVICES						
Enhanced Community Care Management (ECCM) Enhanced Community Care Management (ECCM) is supportive care for chronically ill members who wish to remain independent in the community. ECCM provides specialized care coordination and palliative care coordination that focuses on leading members to live their best life possible. Our interdisciplinary care team, including physicians, advanced practice providers (nurse practitioners and physician assistants), nurses, social workers, and care coordinators, offers person and family-centered care and solutions. ECCM focuses on activating members to engage in self-management of their chronic conditions, improving quality of life, reducing symptom burden, and increasing emotional well-being. Effective communication, continuity of care and addressing care giver burden and advance care planning are hallmarks of ECCM. ECCM care is provided telephonically, virtually, and in the home to ensure we are meeting members where they are and matching them with the appropriate team member and resources based on their changing needs. Our model is flexible, reducing disruption for the member, family, and caregiver by providing care during the most complex parts of the care continuum (chronic, complex care and palliative care). Our team is the extra set of eyes and hands in the home coordinated with the primary care provider to monitor your patient more closely when they need it the most. Members are not required to be homebound or meet skilled level of care criteria to be eligible for services. Members can receive home health and ECCM care at the same time. This service is offered free of charge for Highmark Medicare Advantage and Highmark Individual ACA members. Referrals to ECCM can be made via Epic, Epic Care Link/Healthy Planet, Email, Fax, Phone, HHUM portal and Care Port.		▮	▮	▮		
Matrix Medical House Call Program The Matrix Medical House Call program provides a comprehensive health risk assessment, in the member's home or via telehealth virtual visit, to members enrolled in Medicare Advantage (MA) or Affordable Care Act (ACA) products. The encounter is conducted by a Matrix Medical nurse practitioner and provides care management and consultation to m who have chronic conditions, or are at-risk for further health complications, to help better understand their conditions and how they can access the resources they need. Each visit lasts approximately one hour and focuses on four primary areas: evaluating the member's overall health status, reviewing the member's current medications and screening exams, answering any health-related questions, and helping to ensure that the member's medical history is accurate and up-to-date with complete documentation. Matrix Medical's House Call program is a complement to the PCP in-office visit, helping to identify health related concerns, such as fall risk, home safety, medication adherence, and dietary and nutrition needs that may be difficult to detect in a clinical setting. The home setting also benefits members who are homebound or feel more comfortable discussing health issues at their homes. Upon completion of the House Call visit, Matrix Medical will provide a detailed summary to both the member and their PCP, encouraging the member to follow-up with their PCP to discuss finding.		▮	▮	▮	▮	▮

*Lines of business may vary by region

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*** Lines of business may vary by region.**

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Discrimination is Against the Law

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity. The Claims Administrator/Insurer does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex assigned at birth, gender identity or recorded gender. Furthermore, the Claims Administrator/Insurer will not deny or limit coverage to any health service based on the fact that an individual's sex assigned at birth, gender identity, or recorded gender is different from the one to which such health service is ordinarily available. The Claims Administrator/Insurer will not deny or limit coverage for a specific health service related to gender transition if such denial or limitation results in discriminating against a transgender individual. The Claims Administrator/Insurer:

- **Provides free aids and services to people with disabilities to communicate effectively with us, such as:**
  - **Qualified sign language interpreters**
  - **Written information in other formats (large print, audio, accessible electronic formats, other formats)**
- **Provides free language services to people whose primary language is not English, such as:**
  - **Qualified interpreters**
  - **Information written in other languages**

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

2/2022

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card (TTY: 711).

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意：如果您说中文，可向您提供免费语言协助服务。
请拨打您的身份证背面的号码（TTY：711）。

CHÚ Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số điện thoại ở mặt sau thẻ ID của quý vị (TTY: 711).

알림: 한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. ID 카드 뒷면에 있는 번호로 전화하십시오 (TTY: 711).

ATENSYON: Kung nagsasalita ka ng Tagalog, may makukuha kang mga libreng serbisyong tulong sa wika. Tawagan ang numero sa likod ng iyong ID card (TTY: 711).

ВНИМАНИЕ: Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Позвоните по номеру, указанному на обороте вашей идентификационной карты (номер для текст-телефонных устройств (TTY): 711).

تنبيه: إذا كنت تتحدث اللغة العربية، فهناك خدمات المعاونة في اللغة المجانية متاحة لك. اتصل بالرقم
الموجود خلف بطاقة هو يتك (جهاز الاتصال لذوي صعوبات السمع والنطق: 711).

Kominike : Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan nimewo ki nan do kat idantite w la (TTY: 711).

ATTENTION: Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez le numéro au dos de votre carte d'identité (TTY: 711).

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń pod numer podany na odwrocie karty ubezpieczenia zdrowotnego (TTY: 711).

ATENÇÃO: Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Ligue para o número no verso da sua identidade (TTY: 711).

ATTENZIONE: se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Contatti il numero riportato sul retro della sua carta d'identità (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie dazu die auf der Rückseite Ihres Versicherungsausweises (TTY: 711) aufgeführte Nummer an.

注： 日本語が母国語の方は言語アシスタンスサービスを無料でご利用いただけます。ID カードの裏に明記されている番号に電話をおかけください（TTY: 711）。

توجه: اگر شما به زبان فارسی صحبت می کنید، خدمات کمک زبانی به صورت رایگان در دسترس شماست. با شماره واقع در پشت کارت شناسایی خود (TTY: 711) تماس بگیرید.