

Access to UPMC

The Consent Decree: Understanding network access.

Get information about in-network access to UPMC

What is the Consent Decree?

In June 2014, the Governor's Office and the Pennsylvania Attorney General facilitated the Consent Decree, which describes how members can access UPMC after the commercial contracts between Highmark and UPMC, which have been terminated by UPMC, ended on Dec. 31, 2014. Highmark fully supports this arrangement because it provides a "roadmap" for how members in many Highmark products can access high-quality, affordable health care across western Pennsylvania, including services from Allegheny Health Network, UPMC, and a comprehensive network of community hospitals.

Know Your Options for Care

Why Choose In-Network Providers?

Choosing in-network providers makes life easier for members because providers file the claims and get any necessary approvals. Additionally, providers coordinate care so any referrals will be kept in-network. This helps members save money by using in-network providers.

How and When You Can Use UPMC Providers



Oncology/Cancer Services

Members who have been diagnosed with cancer have in-network access to all UPMC services, facilities, doctors and joint ventures for oncology covered services through June 2019. This includes illnesses and complications resulting from cancer treatment, such as endocrinology, orthopedics and cardiology. (The member's physician must determine that the member should be treated by a UPMC provider who renders oncology services.)¹

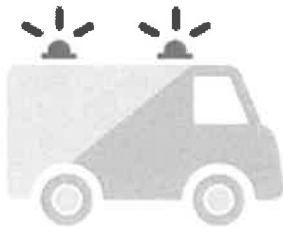


Continuation of Care

Members who were in a continuing course of treatment for a chronic or persistent condition in 2013, 2014 or 2015 with a UPMC provider or an independent provider, and received care for that condition at UPMC, can receive care from those providers at the in-network level of benefits through June 2019 if the care is related to, or in conjunction with, a chronic or persistent condition. This includes routine, preventive and acute care that is received during treatment for a chronic or persistent condition. Otherwise, routine and preventive care will not be covered on an in-network basis.¹

Members cannot be referred to or treated by a **new** UPMC doctor on an in-network basis for care related to a chronic or persistent condition or other conditions they might have or develop. A “new” UPMC doctor means a doctor they have not seen in the past.

Members who were treated at UPMC or by a UPMC physician for a confirmed pregnancy in 2015 may continue to access UPMC on an in-network basis for maternity care, delivery and post-partum care related to that pregnancy. This includes delivery at Magee-Womens Hospital.



ER Access

Members who seek care at any UPMC emergency room will be covered at in-network rates at the highest level of benefits, including any inpatient admission through discharge. Any related follow up care will be covered at the level of benefits provided by your benefit plan.²



Access for Seniors

Highmark members (excluding *Community Blue Medicare Advantage HMO*) who are age 65 or older, and covered by or eligible for Medicare, will have access to all UPMC providers on an in-network benefit level. This in-network access also applies to CHIP and Medicaid members.



Balance Billing Protection

Out-of-network UPMC providers can only bill Highmark members up to the difference between the Plan's payment and 60% of the UPMC provider's billed charges for covered services.



Network

These UPMC hospitals and facilities are still in-network:

UPMC FACILITY	CONTRACT EXPIRES:
Children's Hospital of Pittsburgh of UPMC	6/30/2022
Western Psychiatric Institute and Clinic	6/30/2019
Hillman Cancer Center	6/30/2019
UPMC Altoona	6/30/2019
UPMC Bedford	6/30/2019
UPMC Hamot and its affiliate Kane Community Hospital	6/30/2019
UPMC Horizon	6/30/2019
UPMC Northwest	6/30/2019

These UPMC physicians are still in-network:

- All UPMC-owned physicians outside the five-county Greater Pittsburgh area (Allegheny, Beaver, Butler, Washington, Westmoreland)
- All UPMC-owned physicians when they are practicing at any of the UPMC hospitals that continue to be in-network or at community hospitals
- All UPMC-owned oncology providers
- All UPMC pediatricians at in-network facilities
- All UPMC behavioral health providers at in-network facilities

To learn which UPMC facilities and physicians are in-network, [click here](#).

Avoid Out-of-Network Costs

Need help finding network providers?

Questions

If you have additional questions, you can contact My Care Navigator at 1-888-BLUE-428

[Find a Doctor or RX](#)

All terms of the Consent Decree affect Highmark members in most products, such as *PPO Blue*, *EPO Blue*, *Keystone Blue HMO* and *Classic Blue* traditional indemnity health insurances.

This site will be updated as new information becomes available.

¹ Highmark members in *Community Blue Flex* products and *Connect Blue* can access UPMC facilities in network for oncology/cancer services and continuation of care. The specific terms of coverage will be according to the member's benefit plan. Covered claims from UPMC may be processed at the lower level of benefits.

² Emergency room and any related inpatient care is covered at the Enhanced Value Level of Benefits for *Community Blue Flex* products and at the Preferred Value Level of Benefits for *Connect Blue*. Follow up care will be at the standard level of benefits.



