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PR*NEWS*VIDERS'

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This article has been removed for updates. Please refer to the March providers news for additional information.

Medicare Advantage Contract Amendment – Medicare Advantage Health Advantage HMO

Notice of material amendment to the Medicare Advantage Health Advantage HMO Provider Network Participation Agreement.

Effective January 17, 2023, all HMO Partners Inc. d/b/a Health Advantage (“HMO”) Network Participation Agreements between healthcare providers and facilities and HMO Partners Inc. d/b/a Health Advantage (“HMO”) (the “Medicare Advantage Health Advantage HMO network”), will be amended and reassigned to USABLE Mutual Insurance Company, together with its affiliate, USABLE HMO, Inc. as the new BlueMedicare Classic Medicare Advantage (“HMO”) Network.

The preamble of the Network Participation Agreement shall be amended as follows:

This is Agreement between USABLE Mutual Insurance Company d/b/a Arkansas Blue Cross and Blue Shield , together with its affiliates, USABLE HMO, Inc., and USABLE PPO Insurance Company, (collectively “ABCBS”) and _____ (“Provider/Facility”), a Provider/Facility licensed to practice medicine or provide health care services within the State of _____ (“State”), which shall be deemed effective _____, 20____ (the “Effective Date”). This Agreement admits Provider/Facility to participation in the Medicare Advantage Private Fee For Service (“PFFS”) Network, the BlueMedicare Classic Medicare Advantage Health Maintenance Organization (“HMO”) Network, the BlueMedicare Premier Medicare Advantage Health Maintenance Organization (“HMO”) Network, and the Medicare Advantage Local Participating Provider Organization (“LPPO”) Network (collectively “Networks”).

All other Medicare Advantage terms and conditions of the Original Agreements remain in full force and effect as therein written and remain in full force and effect, including reimbursement. Nothing contained herein shall be construed or interpreted to affect Provider’s participation in Medicare Advantage Health Plan’s provider networks.

To remain in the Medicare Advantage Health Advantage HMO network as well as be included in the USABLE HMO, Inc., BlueMedicare Classic Medicare Advantage HMO Network, no action is required from providers. The contractual relationship simply continues under the Medicare Advantage terms of the amended contract, beginning January 17, 2023. However, if a provider chooses not to accept this new amendment, they must send a letter to USABLE HMO, Inc. giving notice of termination of their contract with HMO Partners Inc. d/b/a Health Advantage (“HMO”) within 30 days of this publication. The termination notice should be sent in accordance to the existing provider/facility agreements as follows to:

President & CEO

Arkansas Blue Cross and Blue Shield
P.O. Box 2181
Little Rock, AR 72201-1489

and copy sent to:

**Arkansas Blue Cross and Blue Shield
Manager, Provider Network Operations
P.O. Box 2181
Little Rock, AR 72203-2181**

These changes affect members of the following Medicare Advantage HMO (CMS Contract ID: H9699) plans:

- MA Health Advantage Blue Premier HMO
- MA Health Advantage Blue Classic HMO

For more information, contact Medicare Advantage HMO Customer Service at **1-877-359-1441**.

Please note: USAbLe HMO, Inc. will administer claims processing on this date moving forward for all previous Medicare Advantage Health Advantage HMO members. Member ID cards and plan names will change, and members have received notification of this change.

Fully-Insured Prior Authorization List Changes

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