

SECTION 5: BILLING AND REIMBURSEMENT GUIDELINES

of the Professional Provider Office Manual

5.10 CONCIERGE MEDICINE

This is a subsection of Section 5: Billing and Reimbursement Guidelines of the *Professional Provider Office Manual*. If we make any procedural changes, in our ongoing efforts to improve our service to you, we will update the information in this subsection and notify our network providers. For complete *Professional Provider Office Manual* information, please refer to the other sections of this manual. Contact information for all manual sections is available in the Manual Reference Section.

For member eligibility, benefits or claims status information, we encourage you to use iLinkBlue (www.BCBSLA.com/ilinkblue), our online self-service provider tool. Additional provider resources are available on our Provider page at www.BCBSLA.com/providers.

This manual is provided for informational purposes only and is an extension of your Professional Provider Agreement. You should always directly verify member benefits prior to performing services. Every effort has been made to print accurate, current information. Errors or omissions, if any, are inadvertent. The Member Contract/Certificate contains information on benefits, limitations and exclusions, and managed care benefit requirements. It also may limit the number of days, visits or dollar amounts to be reimbursed.

As stated in your agreement: This manual is intended to set forth in detail Blue Cross policies. Blue Cross retains the right to add to, delete from and otherwise modify the *Professional Provider Office Manual* as needed. This manual and other information and materials provided by Blue Cross are proprietary and confidential and may constitute trade secrets of Blue Cross.

CONCIERGE MEDICINE

Concierge medicine, (also known as direct care or membership medicine) is a relationship between a patient and a primary care physician for which the patient pays an annual fee or retainer. In exchange for the retainer, doctors provide enhanced care, which includes boutique medicine, retainer-based medicine and innovative medical practice design services.

Some characteristics of concierge medicine may also include advanced wellness screenings and diagnostics, personalized wellness plans, one-on-one physician counseling, diabetes prevention and weight management. Concierge providers may also offer extended routine visits, same day appointments and enhanced coordination of care with specialists.

Blue Cross believes that many of the services offered as concierge medicine should already be part of the standard quality of care that our network providers give to our members without additional fees. These fees cannot include any services that are covered under the health plan.

Network providers may not ever apply any concierge fees toward services that are covered under the member's contract, nor should Blue Cross be billed for any concierge fees. In the future, Blue Cross will be looking at ways to monitor our network providers who provide concierge service to ensure that they are not charging a concierge fee for covered services.

Network providers who exclusively offer concierge services should refer Blue patients who do not wish to participate in the concierge program to another network provider.

Network providers who offer both non-concierge and concierge services should make it voluntary for Blue members and may not discriminate against the non-concierge patients in terms of reasonable access to medical care and quality or comprehensiveness of care. Also, additional administrative fees should not be charged unless it is the standard office process for all patients, regardless of retainer, and patients have first been notified in advance in writing.

Network providers must notify Blue Cross in writing of their involvement in a concierge program prior to contacting our members about your new process. Notification should be made upon signing an agreement to become a concierge provider, or as soon as the decision is made to proceed with a concierge program. Providers choosing to participate in a concierge program will not be immediately removed from our network. We will work with you to ensure that your practice patterns are not in violation with your contract. Providers also agree to periodic audits by Blue Cross to ensure all requirements are being consistently met.

Upon notification, concierge providers will be listed in our provider directories with a notation that they are providing concierge medicine. For our members who do not wish to or are unable to pay the fees associated with concierge medicine, we will help identify non-concierge providers in their network. Please send notification to the Network Administration Division. You may also speak to your Network Development representative if you have questions concerning concierge medicine.

For questions concerning concierge medicine for Blue Advantage (HMO) and Blue Advantage (PPO), please refer to the *Blue Advantage Provider Administrative Manual* found on the Blue Advantage Portal.