

## HELP AMENDMENT TO PARTICIPATING PROVIDER AGREEMENT

Thanks in large part to the support provided to Blue Cross and Blue Shield of Montana (“BCBSMT”) by Montana’s physicians, hospitals, therapists, counselors, and other professionals and vendors, the Montana Department of Public Health and Human Services (“DPHHS”) awarded the third party administrator services (“TPA”) contract to BCBSMT, effective January 1, 2016, for the Montana Health and Economic Livelihood Partnership (“HELP”) Act. As you may know, the HELP Act provides for Medicaid expansion in the State of Montana through the offering of medical and mental health services to approximately 45,000 to 70,000 adults.

The HELP Act was supported by many provider groups, including the Montana Medical Association and the Montana Hospital Association, in order to extend coverage to individuals, who have incomes below 138 percent of the federal poverty level. Medicaid expansion through the HELP Act was intended to address a “hole” in coverage for tens of thousands of Montanans. This expansion is certainly beneficial for low-income Montanans and many of the providers in the State of Montana, who have absorbed the costs of uncompensated care.

Pursuant to the terms of its TPA HELP contract, BCBSMT is required to contract with providers across the State to create a comprehensive provider network to serve the HELP participants, with HELP beneficiary coverage commencing January 1, 2016. In accordance with the expectations of DPHHS, provider compensation rates will be the same as those paid under the current Medicaid program; however, to participate in BCBSMT’s HELP provider network, providers do not have to participate in the State of Montana’s traditional Medicaid program. Non-participation in the HELP network does not impact any provider’s participation in other BCBSMT networks.

All providers must comply with the CMS enrollment and screening requirements outlined in Title 42 Code of Federal Regulations 455 Subpart E. To review these requirements please visit [www.ecfr.gov/cgi-bin/text-idx?SID=83ed7f0661e3bb0ac0243cf9ebe09903&mc=true&node=pt42.4.455&rgn=div5#sp42.4.455.e](http://www.ecfr.gov/cgi-bin/text-idx?SID=83ed7f0661e3bb0ac0243cf9ebe09903&mc=true&node=pt42.4.455&rgn=div5#sp42.4.455.e). Providers currently enrolled in Medicare, Montana Medicaid, or another state’s Medicaid and/or CHIP program do not need to complete the formal enrollment process with BCBSMT.

On the HELP Program webpage, you will find the “HELP Amendment to Participating Provider Agreement” with a provider roster list. If a “HELP Enrollment Application Form” is needed, please access it on the BCBSMT provider website also under the HELP Program. Please sign and date the agreement and complete the provider roster list, indicating each provider’s name in your organization, NPI and whether he/she is currently enrolled in one of the government programs named above. For those providers not currently enrolled, complete the provider enrollment form for each.

Please complete and return all of the requested documents no later than November 15, 2015 via any of the following means: Fax (406/437-7879), e-mail ([HCSPEC@bcbsmt.com](mailto:HCSPEC@bcbsmt.com)), or U.S Postal Service (BCBSMT Network Management – HELP Network, P.O. Box 4309, Helena, MT 59604). If you have any questions, please do not hesitate to contact BCBSMT’s Provider Network Representatives at 800/447-7828, Extension 6100, or use email address [HCS-X6100@bcbsmt.com](mailto:HCS-X6100@bcbsmt.com).

Given that BCBSMT’s 75-year history of service to Montanans began in 1940 with Blue Cross, which was

the result of Montana hospitals addressing the unmet and/or financially challenging coverage needs of Montanans, and in 1946 with Blue Shield, which was the result of physicians doing likewise, BCBSMT is asking for providers to once again take the lead on behalf of low-income Montanans by participating in BCBSMT's new HELP provider network to serve this currently underserved population. A map showing the estimated HELP eligibles in each county and the current estimated average Medicaid compensation per beneficiary in each county are included in this packet, in order that providers can determine the number of HELP eligibles in their service area. As a compassionate, caring community and from a delivery model standpoint, it would seem prudent to get as many State of Montana residents as possible into routine primary care and to have access to specialty and behavioral health services, which the HELP coverage will do.

The key structure, terms, and conditions include:

- Medicaid HELP participation can be accomplished thru an amendment to BCBSMT's current network participation agreement.
- Providers agree that participation is subject to the applicable federal and state laws and regulations related to the Medicaid program. Pending final rule making and finalization of policies and procedures which are still forthcoming, BCBSMT will ultimately publish a provider manual, which will outline many of the operational aspects of participation.
- Providers agree to be compensated at the then current rate(s) applicable to the Medicaid program when services are rendered. BCBSMT intends to compensate providers at the same level Montana's Medicaid program compensates providers for traditional Medicaid beneficiary services. Providers can access the Medicaid fee schedules through the internet at <https://medicaidprovider.mt.gov> or searching under "Montana Medicaid provider information." Once on the site, on the left side of the page, click on "Resources by Provider Type," which will take the user to the various fee schedules.

In order to facilitate assessment of the potential impact on services, information and analyses utilized during the deliberation on HELP are also included in this packet and/or available on the BCBSMT provider website:

- Estimated Montana Medicaid HELP eligible and average spend by county
- Estimated economic impacts of Medicaid HELP expansion by county
- Montana Budget & Policy Center's overview by county
- Montana Budget & Policy Center's overview of uncompensated care in Montana.

As the information illustrates, the impacts are significant and positive for uninsured residents, economic and job growth, counties, and many providers in the State of Montana. Success of the HELP program could well have remarkable, positive ramifications for the State of Montana.

On behalf of the State of Montana and its many uninsured, BCBSMT would respectfully ask that you consider supporting this vulnerable population through your much needed participation. It would be hoped that the collaboration of the Centers for Medicare and Medicaid, the State of Montana, DPHHS, the MHA, the Montana Medical Association, other provider associations, providers themselves, and BCBSMT, would improve the health delivery model and health status of this population, which could positively impact the wellbeing of the State of Montana for generations to come.

Thank you.

Sincerely,

Mark A. Burzynski  
Divisional Senior Vice President  
Provider Services  
Blue Cross and Blue Shield of Montana