

Frequently Asked Questions-Medical

What Is the Consent Decree and to Which Carrier(s) Does It Apply?

UPMC Health System terminated most of its commercial contracts with Highmark on December 31, 2014. The Commonwealth of Pennsylvania facilitated a **Consent Decree** to permit members unlimited access to UPMC Health System in certain circumstances **through June 30, 2019**, when the Consent Decree ends. The Consent Decree applies to both Highmark as a **carrier** and to UPMC as a **health system**. It **does not** apply to UPMC as a **carrier**.

Highmark Consent Decree Provision and Network Access

1. **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 also includes care for any illnesses/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.
2. **ER Access**: Members who seek care at any UPMC emergency room will be covered at in-network rates, including any inpatient admission through discharge.
3. **Continuation of Care**: Any members who were in a continuing course of treatment for a chronic or persistent condition in 2013, 2014, or 2015 (and through 6/30/2016 for care received at UPMC Mercy) 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 your chronic or persistent condition. Routine, preventive, and acute care that is received during treatment for your chronic or persistent condition will also be covered at the in-network level of benefits. Otherwise, routine and preventive care will not be covered on an in-network basis.

You cannot be referred to or treated by a new UPMC doctor on an in-network basis for care related to your chronic or persistent condition or other conditions you might have or develop. A "new" UPMC doctor means a doctor you have not seen in the past.

Members who were treated at UPMC or by a UPMC physician for a confirmed pregnancy in 2015 (through June 30, 2016 at UPMC Mercy) may continue to access UPMC on an in-network basis for maternity care, delivery, and post-partum care related to that pregnancy

4. **Balance Billing Protection**: Out-of-network providers may only balance bill a Highmark member up to the difference between the plan's payment and 60% of the UPMC provider's billed charges for covered services.
5. **Access for Seniors**: Highmark members 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 access also applies to CHIP and Medicaid members.
6. **In-Network Access to UPMC Physicians Includes**:
 - All UPMC physicians outside of the five county Greater Pittsburgh area (Allegheny, Beaver, Butler, Washington, and Westmoreland)
 - All UPMC physicians when they are practicing at any of the UPMC hospitals that continue to be in-network or at community hospitals
 - All UPMC oncology providers
 - All UPMC pediatricians at in-network facilities (includes Children's Hospital of Pittsburgh)
 - All UPMC behavioral health providers (includes Western Psychiatric Institute and Clinic)