

Payment Policy | BCBSRI Use of Provider Performance for Healthcare Operations



EFFECTIVE DATE: 07|08|2015

POLICY LAST UPDATED: 03|07|2017

OVERVIEW

This policy documents Blue Cross & Blue Shield of Rhode Island's (BCBSRI) use of Provider Performance Data.

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Not applicable

POLICY STATEMENT

BCBSRI's network of individual practitioners, group practitioners, hospitals, and ancillary providers, which may include, but are not limited to, skilled nursing facilities, home health agencies, acute substance abuse residential treatment centers, and rehabilitation facilities agree that BCBSRI may utilize provider performance data for health plan operations for all BCBSRI products. Examples of the use of provider performance data for health plan operations include but are not limited to: quality improvement activities, credentialing activities, public reporting to consumers, and preferred status designation in the network (tiering) where applicable, and cost-sharing for using preferred providers. Regarding initiatives that involve public reporting, BCBSRI will issue advance notice introducing the program to providers prior to implementation.

COVERAGE

Not applicable

BACKGROUND

It has been the standard practice of BCBSRI to utilize provider performance data in various initiatives and programs over the past several years. The policy statement above reinforces the practice that providers allow BCBSRI to use this performance data.

CODING

Not applicable

RELATED POLICIES

None

PUBLISHED

Provider Update, May 2016

Provider Update, August 2015

Provider Update, May 2014

Provider Update, June 2013

REFERENCES

Not applicable

CLICK THE ENVELOPE ICON BELOW TO SUBMIT COMMENTS

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice. Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

