



**BLUE CROSS AND BLUE SHIELD OF ILLINOIS  
POLICY**

<b>DEPARTMENT:</b> Network Provider Performance	<b>POLICY NUMBER:</b> Administrative 14	<b>ORIGINAL EFFECTIVE DATE:</b> 12/01/1997
<b>POLICY TITLE:</b> Contract Management Firms: Confidentiality Agreement		<b>EFFECTIVE DATE:</b> 11/01/2022
		<b>LAST REVISION DATE:</b> 11/01/2021
<b>EXECUTIVE OWNER:</b> DSVP, IL Health Care Delivery	<b>BUSINESS OWNER:</b> Manager, Provider Performance	<b>LAST REVIEW DATE:</b> 11/01/2022

**I. SCOPE**

This Policy applies to Blue Cross and Blue Shield of Illinois (BCBSIL) Health Management Organization (HMO), and for the following lines of business and products:

Line of Business / Product Scope / Plan Scope/Contract Number (if applicable)	In Scope [x]
HMO Commercial	x
HMO Exchange	x
PPO Commercial	
PPO Exchange	

**II. PURPOSE**

To ensure that all information and data considered of a confidential nature (as defined in the Confidentiality Agreement) is acknowledged and preserved by the Contract Managed Firm (CMF).

**III. POLICY**

A Contract Management Firm (CMF) is a subcontractor retained by a Medical Group/Independent Physician Association or Physician Hospital Organization (hereinafter the "IPAs"), to perform certain management and administrative functions. A Confidentiality Agreement will be executed between the IPA, the CMF and Health Care Services Corporation (HCSC).

**IV. CONTROLS/MONITORING**

Line of Business and/or Area	Control Requirements
HMO IL	Controls for HMO IPAs, CMF and HMO IL to sign Confidentiality Agreement is under HMO Network. The Assigned HMO Provider Network Consultant obtains the signed documents and provides document to BCBSIL contracting and HMO Network Management.

## V. RELATED DOCUMENTS

Administrative 14A - Contract Management Firms: Confidentiality Agreement

## VI. IMPACTED BUSINESS AREAS

- HMO IL Network and Operations
- BCBSIL Contracting
- HMO Utilization Management
- HMO Service Centers

## VII. POLICY REVIEWERS

Person Responsible for Review	Title	Date of Review
Mary Ellen Merbeth	HMO Provider Network Consultant	10/6/2021
Danielle Washington	HMO Provider Network Consultant	10/5/2022

## VIII. POLICY REVISION HISTORY

Description of Changes	Revision Date
Transferred P&P to new P&P template	09/29/2021

## IX. POLICY APPROVALS

Company, Division, Department and/or Committee	By: Name	Title	Approval date
BCBSIL P&P Committee			10/28/2021
BCBSIL P&P Committee			10/27/2022