



**PAYER CONTRACT ADDENDUM
BRIGHT HEALTH MANAGEMENT, INC.
BRIGHT HEALTH BH-1**

PAYOR PLAN SUMMARY	
Contracted Organization	Bright Health Management, Inc.
Product	Commercial Benefit Plans (includes individual plans and small employer plans) Employer Benefit Plans (includes large employer plans)
Service Area	Utah
Service Effective Date	01/01/2022
Contracted Network	NMG Chiropractic Network
COMPENSATION TERMS AND CONDITIONS	
<p>Medical Codes: 120% of Medicare Fee Schedule Radiology Codes: 90% of Medicare Fee Schedule Durable Medical Equipment: 75% of State Specific Non-Rural CMS DMEPOS Fee Schedule</p> <p>For DOS 1/1/2022 to 12/31/2022, the 2021 final release (i.e., Quarter 4) Medicare Fee Schedule will be used. For DOS 1/1/2023 and later, the respective year's first release (i.e. Quarter 1) will be used.</p> <p>Providers will make best commercial efforts to submit claims for Covered Services within ninety (90) days, and in no event later than one-hundred twenty (120) days, after the date of service.</p> <p>Bright Health agrees to pay the lesser of billed charges or the rates set forth below, less Member Expenses (copayments, coinsurance, deductibles, etc.).</p>	