

| Primary Insurance                                    | Line of Business              | PCP Participation Status                                                                                                        | Specialist Praticipation Status                   |
|------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Aetna                                                | Commercial                    | YES                                                                                                                             | YES                                               |
| Aetna                                                | Medicare Advantage            | YES                                                                                                                             | YES                                               |
| Blue Card <b>HMO</b> (out of area BC/BS)             | <b>Commercial</b>             | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Blue Card <b>HMO</b> (out of area BC/BS)             | <b>Medicare Advantage</b>     | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Blue Card PPO (out of area BC/BS)                    | Commercial                    | YES                                                                                                                             | YES                                               |
| Blue Card PPO (out of area BC/BS)                    | Medicare Advantage            | YES until 6/30/25 only ***                                                                                                      | YES ***                                           |
| CHAMPVA                                              | Commercial                    | YES                                                                                                                             | YES                                               |
| Cigna                                                | Commercial                    | YES                                                                                                                             | YES                                               |
| Cigna                                                | Medicare Advantage            | YES                                                                                                                             | YES                                               |
| Empire                                               | Commercial                    | YES                                                                                                                             | YES                                               |
| Fidelis                                              | Essential                     | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| <b>Fidelis</b>                                       | <b>Exchange (Metal Tiers)</b> | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Fidelis                                              | Medicaid Managed Care         | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Fidelis <b>HMO</b>                                   | <b>Medicare Advantage</b>     | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Fidelis PPO                                          | Medicare Advantage            | NO                                                                                                                              | YES                                               |
| Fidelis                                              | <b>Medicare/Medicaid Dual</b> | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| First Health                                         | Commercial                    | <b>NO</b>                                                                                                                       | YES                                               |
| GHI                                                  | Commercial                    | <b>NO</b>                                                                                                                       | YES                                               |
| Highmark BC/BS                                       | Commercial                    | YES                                                                                                                             | YES                                               |
| Highmark BC/BS                                       | Essential                     | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Highmark BC/BS                                       | Exchange (Metal Tiers)        | YES                                                                                                                             | YES                                               |
| Highmark BC/BS (Amerigroup)                          | Medicaid Managed Care         | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Highmark BC/BS <b>HMO</b>                            | Medicare Advantage            | YES until 6/30/25 only ***                                                                                                      | YES ***                                           |
| Highmark BC/BS PPO                                   | Medicare Advantage            | YES until 6/30/25 only ***                                                                                                      | YES ***                                           |
| Humana <b>HMO</b>                                    | <b>Medicare Advantage</b>     | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Humana PPO                                           | Medicare Advantage            | NO                                                                                                                              | YES                                               |
| Independent Health                                   | Commercial                    | YES                                                                                                                             | YES                                               |
| Independent Health                                   | Exchange (Metal Tiers)        | YES                                                                                                                             | YES                                               |
| Independent Health                                   | Essential                     | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Independent Health                                   | Medicare Advantage            | YES                                                                                                                             | YES                                               |
| Independent Health (Medisource)                      | Medicaid Managed Care         | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Independent Health <b>thRed</b>                      | Commercial                    | <b>NO</b>                                                                                                                       | YES                                               |
| Magna Care                                           | Commercial                    | <b>NO</b>                                                                                                                       | YES                                               |
| Martin's Point                                       | Tricare                       | YES                                                                                                                             | YES                                               |
| Medicaid NYS                                         | Medicaid                      | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| <b>Medicaid Out of State</b>                         | <b>Medicaid</b>               | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Medicare/Rail Road Medicare                          | Medicare                      | YES                                                                                                                             | YES                                               |
| Molina                                               | Medicaid Managed Care         | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Multiplan                                            | Commercial                    | <b>NO</b>                                                                                                                       | YES                                               |
| No Fault                                             | No Fault                      | Inquire with specific provider                                                                                                  | Inquire with specific provider                    |
| NOT LISTED                                           | Commercial                    | NO Call 716-630-1185 with questions                                                                                             | YES                                               |
| Nova                                                 | Commercial                    | YES                                                                                                                             | YES                                               |
| PHCS                                                 | Commercial                    | <b>NO</b>                                                                                                                       | YES                                               |
| TRICARE                                              | Tricare                       | YES                                                                                                                             | YES                                               |
| United HealthCare                                    | Commercial                    | YES                                                                                                                             | YES                                               |
| United HealthCare                                    | Exchange (Metal Tiers)        | YES                                                                                                                             | YES                                               |
| United HealthCare                                    | Medicare Advantage            | YES                                                                                                                             | YES                                               |
| United HealthCare                                    | <b>Essential</b>              | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| United HealthCare                                    | <b>Medicaid Managed Care</b>  | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Univera                                              | Commercial                    | YES                                                                                                                             | YES                                               |
| Univera                                              | Exchange (Metal Tiers)        | YES                                                                                                                             | YES                                               |
| Univera                                              | Medicare Advantage            | YES                                                                                                                             | YES                                               |
| Univera                                              | Essential                     | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| Univera                                              | Medicaid Managed Care         | YES for current patients only                                                                                                   | YES for current patients internally referred only |
| VACCN                                                | VA                            | YES with prior auth from VA                                                                                                     | YES with prior auth from VA                       |
| Wellcare <b>HMO</b>                                  | <b>Medicare Advantage</b>     | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Wellcare <b>HMO</b>                                  | <b>Medicare/Medicaid Dual</b> | <b>NO</b>                                                                                                                       | <b>NO</b>                                         |
| Wellcare PPO                                         | Medicare Advantage            | NO                                                                                                                              | YES                                               |
| Wokers Comp                                          | Workers Comp                  | Inquire with specific provider                                                                                                  | Inquire with specific provider                    |
| z.Buffalo Medical Group Insurance Participation List | Effective 1/1/25 rev. 5.23.25 | *** Providers NEW to BMG after 1/1/25 may not participate with Highmark, please verify participation status with your provider. | <b>Call 716-630-1185 with questions</b>           |