MVPFASTFAX

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Important News for **Providers**

This communication should be viewed by:

Providers; All Facility/Practice Staff

Independent Health to Join MVP Health Care's Family of Companies

MVP Health Care® (MVP) is proud to announce that Independent Health will join its family of companies, subject to regulatory approval. Together, the two organizations intend to build the foundation for a new era of health and well-being across New York, Vermont, and beyond—one that is built on local trust, innovation, and a shared commitment to improving lives.

Pending regulatory approval, the affiliation of two mission-driven, not-for-profit health plans with deep community engagement, reflects a bold vision and strategy to create a health care experience that is more connected, personalized, and proactive. By aligning strengths, MVP and Independent Health will serve nearly one million members and employ over 3,000 people across the region with $7 billion in annual revenue. This marks a pivotal moment in regional health care and a chance to lead the way in transforming health care delivery and redefining what local health plans can accomplish.

The affiliated entities will prioritize initiatives designed to meet evolving consumer needs, including improving provider collaboration, advancing pharmacy services, and implementing technology to simplify and personalize care navigation. Key to this effort is a commitment to addressing the growing pace of change in health care and ensuring the organizations adapt to new ways of working for the benefit of members, providers, and communities.

Providers will benefit from expanded resources, deeper clinical expertise, and stronger regional networks. They can expect enhanced support for care navigation, improved data sharing, and new opportunities for collaboration on innovative health initiatives. Together, we are building more agile, responsive organizations that are committed to strengthening provider relationships, improving patient outcomes, and supporting the evolving needs of the provider community across New York and Vermont.

Members, providers, and partners can expect business as usual with no immediate changes to coverage, benefits, our network, reimbursement rates, or local personalized service. Both organizations are committed to transparent communication to ensure a smooth experience for all stakeholders.

Providers should continue to use the contact information on the back of member ID cards to check for member eligibility, prior authorizations, and to submit for reimbursement.