



MEETING MINUTES

Meeting topic: Meeting with MPTA regarding Utilization

Date	November 6, 2017
Time	9:00 AM
Location	BCN Commons Moose Conference Room 2
Facilitator(s)	William Wagner
Physician Lead	Dr. Duane DiFranco
Attendees	BCBSM: Dr. Marc Keshishian, Teresa Henry, Rozanne Fleszar, Juanita Savage, Michael Greenlee, Jeniene Edwards, Laurie Latvis, Aeysha Hannah, and Denise Turman eviCore: Rocco Labbadia and Vycki Rupakus MPTA: Janis Kemper, Mike Shoemaker, Chris Nawrecki, Scott MacDonald, David Gilboe, Jake Jakubiak Kovacek, Michelle Marlow, and Matt Schrader
Meeting Objective	To discuss issues with the utilization management system.

Minutes:

Meeting started with introductions.

Blue Cross Blue Shield of Michigan (BCBSM) reviewed the below presentation regarding the statistics for eviCore over the last year.



Stats.pptx

BCBSM discussed the new Core Path program with the Michigan Physical Therapy Association (MPTA). This program model was developed with eviCore and is the result of the meetings we have had with the MPTA. Core Path will start January 1, 2018. Core Path is designed to reduce the administrative burdens providers are experiencing with prior authorizations for physical therapy. Core Path will reduce the number of questions asked of the provider, eliminate the preset number of visits, and will track member progress. Since BCBSM is no longer establishing a set number of visits per condition we will eliminate the provider tiering. The providers currently in tier A will remain in tier A and will only have to enter demographic information. They will not submit clinical reviews to get an authorization. However, no additional providers will be added to tier A. BCBSM has not determined how long the tier A providers will remain in their program before being moved over to Core Path.

BCBSM is hoping that this program will be rolled out for Medicare Plus Blue on January 1, 2018. Blue Care Network (BCN) will hopefully have the Core Path model established for BCN in July of 2018 and for BCBSM commercial at some point in the future. At this time, no date has been set for BCBSM commercial. MPTA asked about training before January 1, 2018. BCBSM stated that later this week we will have finalized a training plan. This training also includes the possibility of town halls, webinars, and training videos.

The MPTA asked how eviCore will get co-morbidities to be recognized by the Core Path system. EviCore stated, that there is the ability to include co-morbidities and select other conditions that could impact patient recovery time. Selecting these conditions will help determine frequency and intensity of care. EviCore stated that when making the third request for visits providers can submit clinical documentation to support the need for additional visits. EviCore stated that the average patient would be finished or almost finished by the end of the second set of visits. By the third request, eviCore will want to understand why the care is continuing. MPTA asked how this is different than what they currently do. EviCore stated that Core Path only asks four or five basic questions on the first request. The second requests ask about progress and why there might be any issues with progress for the patient. Also on the first and second requests the provider could receive real time approval. The MPTA asked how many visits the patients will get and if it will be a set amount over a period time. EviCore stated that the frequency is condition dependent and there will be greater frequency of care for certain conditions. The MPTA asked if the time frame for each request will vary per condition or how long the time frame will be per request. EviCore stated that it will vary based on the information included in the request. EviCore stated that it will not ask how many visits the provider wants but will base the number of visits on the answers they provide to the questions. Requests for a specific number of visits will have to be reviewed by a physical therapist for approval.

The MPTA asked if this process will affect the number of units that are authorized. EviCore stated that they will approve both visits and units, as they currently do. MPTA asked, what will happen if the complexity is not on the list of complexities that eviCore has



MEETING MINUTES

listed. EviCore stated that unless something is very bizarre, then the visits will be approved on the first two requests and the third request for visits will require review.

MPTA asked, who will be determining how many visits are appropriate for the patient. EviCore stated that there is a group of physical therapists at EviCore that set policy and make the determination. MPTA asked if EviCore can share the logic being used to determine authorizations. EviCore cannot give out the logic since it is proprietary and providers might answer the questions in a way that would result in more visits. MPTA asked, how many complexities Core Path has and how many diagnoses does it cover. EviCore stated, it is determined by body part and by complexity of care as determined by the question answers.

MPTA would like to know what studies EviCore is basing their authorization decisions on. EviCore stated, that, the information is available on the website and they are open to reviewing new documentation. This information can be submitted to BCBSM or EviCore. EviCore also stated, that Core Path is not yet established for the hand but that is being developed. The MPTA asked, when will it be developed. EviCore stated, they are not sure but will find out and let the MPTA know. The MPTA asked, how will hand authorizations be determined? EviCore stated, that it will be determined by the current process.

MPTA expressed a concern, that their members are being told that their patients would do fine with a home exercise program. The MPTA would like EviCore to include references to why they feel this is necessary. EviCore stated that it currently does not include reference material in its messages, because they are written for the specific patient. So, it makes it difficult to write a complex message for the provider but they will discuss doing this with BCBSM.

MPTA asked for the link to the evidence EviCore uses in its authorization criteria. EviCore stated it would provide the link which is below:

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c15.PDF>

MPTA asked what BCBSM means by the grandfathering of the A providers. It means that those providers that are currently tier A providers will submit basic information to get authorization, as they do now. It is being considered that in the future BCBSM will remove the grandfathering and require everyone to follow Core Path. BCBSM also stated that tiering will no longer be a factor in authorizations once the tier A providers are no longer grandfathered.

MPTA asked what happens when there is no way to determine, from the research, how many visits are needed. EviCore stated, that the review is fluid and EviCore is willing to provide more visits if the evidence shows they are needed. EviCore stated, that they will continue the discussions with the MPTA after Core Path is launched.

The MPTA asked, if BCBSM could eliminate the number of units restricted on the authorizations. EviCore stated that there needs to be unit control since that can be abused and raise costs. EviCore will discuss different ways of doing unit restrictions with BCBSM.

The MPTA asked, if BCBSM is still planning on doing audits. BCBSM stated yes, if there is a pattern of misuse or possible fraud, BCBSM can still audit a provider.

MPTA asked, if visits would be approved over a certain period. EviCore stated, that they approve the number of visits, units, and time frame in which the units may be used.

MPTA asked, if the physical therapist should ask for additional visits while the patient still has some visits remaining. EviCore stated yes, they can start the process up to seven days before the patient's last visit.

The MPTA is concerned that the implementation may be too soon and asked if we can do a pilot program. EviCore stated they are doing a trial in a different market and it has been very successful. EviCore and BCBSM will provide extensive training for providers before the implementation. BCBSM stated, they will talk about creating a draft for PTs to use as an example. BCBSM also stated that no technical changes are needed to follow Core Path.

The MPTA requested that BCBSM review how BCBSM looks at value of services. For example, helping patients avoid surgery, medication, or other expensive treatments which cost more than physical therapy care. Also, how physical therapy improves patient satisfaction and patient outcomes. BCBSM agrees conceptually with the MPTA but the challenge is applying it in practice. There is also a risk that all involved must bear for an outcome based program to work, including providers and groups. Not all groups want to take that risk. BCBSM is willing to hear any suggestions the MPTA has regarding creating this program. The MPTA stated, that it is working on this but it is in the early stages.

The MPTA asked about diagnosis codes that are not getting paid, for example TMJ codes that CMS pays. This seemed to have happened since the move to ICD 10 codes. BCBSM asked if the MPTA had claim examples and spoke to the provider consultant. The MPTA stated that they did speak to the provider consultant and they said BCBSM was not going to pay the code. BCBSM stated



MEETING MINUTES

that on the commercial side our policies do diverge from CMS. MPTA asked who they should discuss this with if they feel a change is needed. BCBSM responded that MPTA needs to contact the provider consultant. The consultants can route the concern to the appropriate area. BCBSM would then research the issues and formulate a recommendation.

MPTA asked about accepting a nurse practitioner (NP) signature for physical therapy since it is now in their scope of practice. BCBSM asked, when the law changed to allow this. MPTA stated, that this happened April 7, 2017. BCBSM will review the nurse practitioner issue and respond.

The MPTA asked, if chiropractors are going to follow Core Path. BCBSM stated yes, on the commercial side of the business they will be using Core Path. The MPTA asked why the chiropractors are not required to use Core Path for Medicare Plus Blue. BCBSM stated, that it was reviewed and considered not necessary as Medicare has very little chiropractic coverage.

The MPTA stated, that eviCore is holding up approvals for physical therapy when the patient transfers from one physical therapist to the next. The MPTA is being told that this will happen until eviCore receives the patients discharge paperwork. The MPTA asked, if there was a way to have patients sign off stating they are not going back to their previous physical therapist. EviCore stated the patient can call eviCore and let them know they have discontinued care with the previous physical therapist. This will cause all physical therapy requests to be manually reviewed for approval. MPTA stated that despite doing that, the delays were considerable. EviCore asked them to e-mail the specific cases to them.

BCBSM asked about the status of the letter on the MPTA website that provided patients a way to complain about issues with BCBSM. The MPTA stated that they are removing the suggestion of contacting the insurance commissioner and advising members to follow the insurance company's process for resolving issues.

Next meeting:

Date	To be determined
Time	
Location	