

Michigan Physical Therapy Association, 1055 N. Fairfax St, Suite 205, Alexandria VA 22314

September 27, 2017

The Honorable Debbie Stabenow United States Senate

731 Hart Senate Office Building Washington, D.C. 20510-2204

221 W. Lake Lansing Rd, Suite 100 East Lansing, MI 48823 Attn: Adam Delay

Dear Senator Stabenow,

As President of the Michigan Physical Therapy Association (MPTA), I am writing on behalf of our nearly 3,000 members to express concern about Blue Cross Blue Shield of Michigan's (BCBSM) implementation of the eviCore utilization management program for its Medicare Advantage product. The MPTA respectfully requests that you please hold CMS accountable for a thorough investigation of the eviCore program and the ways that we believe it is adversely impacting its covered beneficiaries.

The MPTA understands that two of our members had individually requested that you send a letter of inquiry to CMS about these concerns. Both of these members did not believe that the follow-up by CMS was satisfactory as CMS simply relied upon BCBSM's self-report and assurance that Mr. 's and Ms. 's experiences were isolated, and that the situation was being resolved through working with the MPTA. Although MPTA is communicating with BCBSM about the aforementioned concerns, we have not observed any changes in eviCore policy or execution as a result of these discussions, and can assure you that those concerns are widespread across physical therapy provider types and settings. Therefore, the MPTA is hopeful that another letter of inquiry from you, supported by the attached data, might be more effective.

Included in this communication are sample letters from patients describing their negative experiences with the eviCore program as well as data collected from our members regarding the presence and magnitude of denials and delays in authorization for medically necessary physical therapy services. Based on these objective findings, data, the MPTA believes that the eviCore program is denying timely and sufficient access to the Medicare benefits to which patients are entitled, and is administering benefits inconsistent with best available research evidence, professional practice standards, and Medicare guidelines.



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In addition to the data we are presenting regarding delays and denials, patients commonly report frustration that they are told by eviCore that the care recommended by their physical therapist and physician is not approved. This frustration is compounded by the commonly reported confusion about why they are being restricted to so few visits when their benefit limit is much higher. In fact, it is not clear that patients actually understand that they have enrolled in a managed care version of Medicare that can restrict access to care to which they would otherwise have access under a traditional Medicare plan that allows the health care provider to make judgements about medical necessity.

It is our understanding that the division of Medicare Health Plans Operations is the local component of the Consortium for Medicare Health Plans Operations (CMHPO) and is responsible for: 1) account management - oversight, market surveillance and first level compliance of managed care and prescription drug organizations; 2) Part C and D beneficiary casework and 3) outreach to beneficiaries, partners and stakeholders; 4) Other specific functions to include:

- day-to-day oversight, guidance and technical assistance to Part C and D plans regarding CMS requirements as well as.
- conducting related site visits
- reviewing plan marketing materials
- performing program audits of the accounts
- managing beneficiary and provider casework
- management of relationships with state health insurance programs, advocates, other stakeholders and State Departments of Insurance

In short, the MPTA is hopeful that, upon your request, CMS will thoroughly investigate these concerns by examining actual BCBSM and eviCore data pertaining to denials of medically necessary care, delays of care, and beneficiary complaints. Such an investigation appears to be consistent with the scope of duties for the Medicare Health Plan Operations Division, especially when provided with data that indicate a widespread problem.

The MPTA is grateful for any assistance you can provide.

Respectfully,

Michael J. Shoemaker, PT, DPT, PhD

President

Michigan Physical Therapy Association