



January 5, 2023

Jared L. Short
President & Chief Executive Officer
Cambia Health Solutions
100 SW Market Street
Portland, Oregon 97201

Dear Mr. Short:

This letter is in follow up to the letter dated August 8, 2022 to which the AOA did not receive a response. The following information was contained in the original letter. A response is respectfully requested.

The American Osteopathic Association (AOA) represents more than 178,000 osteopathic physicians (DOs) and osteopathic medical students nationwide. As you are undoubtedly aware, DOs bring a unique, patient-centered approach to medicine, with approximately 57% of practicing DOs specializing in primary care specialties. On behalf of the AOA, I am requesting clarification on Regence's "enhanced claim editing" which has caused an increase in denials impacting our members and their patients. These automatic denials of Evaluation and Management (E/M) services on the same day as osteopathic manipulative treatment (OMT) have threatened the ability of osteopathic physicians to provide accessible care to patients and obtain fair reimbursement for services provided. Such financial pressure has threatened the existence of many osteopathic physician practices and access to care in the communities that they serve.

Although physicians have the right to appeal denials, physicians and practice staff are overburdened with multiple denials and do not receive information that would guide them in making any necessary adjustments to their coding, billing, or documentation of these services. According to our members, provider relations representatives are not accessible or knowledgeable about questions pertaining to the original denial, denial response or appeal status.

The AOA shares Regence's concerns with the rising cost of healthcare and recognizes the importance of payers' fraud, waste and abuse preventions and detection processes. We are committed to providing the osteopathic profession with the most up-to-date information related to coding, billing, and documentation compliance. However, numerous osteopathic physicians from Idaho, Oregon, Utah, and Washington have contacted the AOA and their respective state osteopathic medical associations to request assistance with these increasing denials. After conducting a review of these denials and supporting documents, the AOA found that: 1) the documentation and coding consistently supported the services billed; 2) Medical Audit & Review Solutions (MARS) findings were not consistent with CMS nationally accepted payment policies related to the reporting of E/M and OMT on the same day; 3) physicians did not receive specific communications that would allow them to appeal denials or audits; 4) appeal responses from MARS were varied and inconsistent and 5) provider relations representatives could not adequately address these issues.

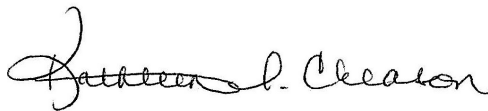
In March 2013, AOA Board of Trustees then member, Boyd Buser, DO, AOA staff, Osteopathic Physicians and Surgeons of Oregon physicians and staff met with Oregon Regence BlueCross Chief Medical Officer, Csaba Mera, MD, to discuss these same concerns. At that time Dr. Buser clarified that E/M and OMT do *not* occur simultaneously. Instead, physicians use the E/M to determine whether OMT is needed. This explanation of OMT services is backed by payment policies included in Centers for Medicare and Medicaid Services' (CMS) National Correct Coding Initiatives (NCCI) and Current Procedural Terminology (CPT) guidance. The meeting attendees seemed to be in agreement that if clearly documented as a significantly separately identifiable E/M service provided in addition to the OMT, both services would be paid accordingly.

In addition, our understanding is that the Regence process for obtaining a Level 2 Adverse Determination Appeal requires a fee of \$50 to the physician. We oppose the practice of charging for a review when payment is already being withheld for the services provided, and the physician had no control over the denial decision prompting the need for appeal. Additionally, there is confusion amongst practices whether they can obtain a 2nd level internal appeal at no cost. The responses to appeals do not contain guidance on this however, the Regence website indicates this as an option.

As stated, the AOA strongly objects to the automatic denial of any claims for covered, medically necessary services and then review of the submitted records by an auditor not familiar with the nuances of E/M -25 and OMT services provided on the same day. We acknowledge Regence's past willingness to work with the AOA and believe that suspending these automatic denials in all four Regence states is an excellent first step to resolve our concerns. As Regence reviews its denial and audit process, we ask that in all four states, Regence clarifies its position on E/M and OMT provided on the same day, shares its findings so physicians may educate themselves on potential adjustments, informs physicians of the appeals process as well as what information may be missing in their records, and designates informed provider relations representatives as well as MARS staff to resolve these issues. The AOA welcomes the opportunity to work with Regence to reach an amicable solution to this matter.

Thank you for your consideration and your commitment to providing support to contracted DOs that are providing high-quality, patient-centered care to Regence's members. We look forward to hearing from you or a member of your team. If you have any questions or need any additional information do not hesitate to contact Kim Popernik MHA, Manager Physician Payer Relations via phone (312) 202-8032 or e-mail at kpopernik@osteopathic.org.

Sincerely,



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