

BCBS – IL and IOMS Meeting

July 24, 2019

Re: Clinical Validation Review Process Concerns Meeting Summary

In Attendance:

- Derek Robinson, MD, Vice President and Chief Medical Officer
- Amber Canady, Solutions Management Manager
- Beth Matzke, Divisional Vice President, Sub-Divisional Officer
- Geoff Guiton, Executive Director, Network Performance
- Emily McMaster, Senior Manager, Reimbursement Programs
- Robert Janowitz, MD, Medical Director
- Kim Huntington-Alfano, DO, Clinical Assistant Professor, Midwestern University and IOMS Board Trustee
- Kurt Heinking, DO, OMM Department Chair, Midwestern University
- Samyuktha Gumidyala, MPH, IOMS Affiliate Executive

Introductions and Background

- Introductions were given
- Dr. Kim Huntington-Alfano thanked BCBS for meeting with IOMS regarding the clinical validation process
- Since 2017, DO's have been affected by the HCSC policy
- IOMS's goal is to understand the BCBS's rationale and future direction of this initiative as well as to be a resource and share how this has impacted the osteopathic profession

Discussion of HCSC Modifier 25

- Emily McMaster explained the clinical validation review process – it's an automated program ensuring that providers that performing the services that they're billing for
- What happens is that when a claim is submitted with a modifier 25 it is flagged in the system. A nurse then reviews the claim to see if they can validate the appropriateness of the claim (do they have enough information in the medical records, does the documentation they provide support use of the modifier)
- 7% of claims coming through are denied and is solely based on use of modifier 25 – is there enough information to support by coding perspective

- BCBS-IL has the ability to meet with providers who have gone through the inquiry process and walk through modifier 25 and their medical records with them and show what exactly they are looking for
- Ask that providers use greater specificity on their claims and contact network representative for additional resources
- System reviews and runs analytics all providers including those who have used modifier 25 appropriately and process applies to all provider types

Impact on Patient Care/Physician Practices/Student Education/Outcomes

- Dr. Kurt Heinking expressed concerns that DO's are needing answers to this and Midwestern University has students learning and applying OMT on rotations – how can this impact education
 - If there is no good reimbursement, can affect admissions and residency programs
- DO's utilize the entire scope of medicine
 - By doing service (E/M and OMT) on the same day, it allows for patient satisfaction and better access to care
 - Students are not taught to keep bringing patients back
 - No treatment plan
 - Concern that DO's will leave insurance practices and resort to cash which will limit patients' access to care based on their financial resources
- Discussion of definition of separate and distinct service for E/M
 - BCBS determines if claim is appropriate based on provider's documentation and if it's a significant and separately identifiable service, not based on clinical/anatomic region
- Question of why OMT is being "lumped" in with chiropractic and PT services
 - **Action Item:** BCBS will discuss internally regarding service limits on OMT and the setup of that and follow up
- BCBS encourages providers to look out for updates on website and newsletter
- Suggestion that students be taught how to follow reimbursement, correct coding and documentation procedures
- Opioid Epidemic - \$78.5 billion economic cost per year; OMT is an alternative approach to pain

Next Steps

- IOMS/AOA and BCBS being a resource for each other and work together so DO's get adequate reimbursement and proper documentation is provided

- Develop opportunities so members and osteopathic community can be educated and know exactly what they need to do, why the denial is made and what steps they need to take so it doesn't happen again – reduce administrative burden
- Dr. Huntington-Alfano suggested IOMS putting together a webinar on proper coding procedures and reimbursement guidelines
- **Action item:** Emily McMaster will follow up with resources and educational opportunities for the providers
- Continue dialogue, collaborate and get a clear message out to providers who are impacted