

APTA Indiana Members:

Over the past 1.5 years, since implementation of Anthem’s utilization management program for physical therapy, administered by AIM Specialty Health, physical therapy providers in Indiana and the other states AIM is present, have been challenged by obstacles. These challenges range from inappropriate visits authorized (often 4-6 initially and 2-4 with 2nd/3rd requests) and denied care that is reasonable and medically necessary, to long wait times scheduling (45-60+ minutes), what often become, unproductive peer to peer reviews in an attempt to extend physical therapy services.

Patients, as a result, are not consistently receiving the care they need due to limited/denied visits, denial of requested treatment codes, or delayed care due extensive periods of time passing while authorization is pursued. Providers are also losing patient care time due to this administrative burden. Furthermore, Anthem/AIM recently added several common modality CPT codes to their list of exclusions further restricting reasonable and necessary services.

Over the past 1.5 years, APTA and state chapters, including APTA Indiana, have attempted to work with Anthem to help resolve these systemic issues. Over this time period, APTA has sent several letters to Anthem, met with Anthem on a number of occasions, jointly met with 13 of the state insurance commissioners, along with representatives from ASHA and AOTA, in regards to this issue, and recently sent a letter to CMS to report the issues Medicare beneficiaries are having with Anthem Medicare Advantage plans. Some states have begun filing complaints with Medicaid or their insurance commissioners to make them aware of the problem. APTA has advised state chapters, patients and providers to report ongoing issues to the insurance commissioner, Medicaid, CMS and human resource benefit managers, where applicable.

Complaints regarding AIM issues, received by APTA Indiana, have ebbed and flowed over the past 18 months. In recent months, they have been less consistent, although the fall survey indicated it is an ongoing issue to the 33 members who completed the survey. **To be a strong voice, advocating for proper patient access and to help ensure patients are receiving services they are entitled to under insurance laws, physical therapy providers and patients are encouraged to:**

1. First, exhaust patient and provider appeal rights with the payer.
2. Next, providers and patients submit complaints to the following relevant oversight entities to make them aware of the problem and advocate for appropriate access to care.

* **Indiana Medicaid:** 
  + Mail complaints to:

Family and Social Services Administration

Office of Hearings and Appeals

402 West Washington Street, Room E034

Indianapolis, IN 46204

* + The Office of Hearing and Appeals can provide a State Fair Hearing through the Office of General Counsel.
  + Provider Template:
    - [**Letter to State Medicaid Office RE: Issue Managed Care Organization**](https://www.apta.org/contentassets/4d5cb9e837c6460c94c5e47bda8fc8b6/clinician-template-to-mco-to-medicaid.docx)
* **Medicare Complaint and/or Dually Eligible Medicare Patient with a Managed Care Medicaid Plan:**
  + Provider and patient contact 1-800-Medicare. Afterwards, contact advocacy@apta.org to alert APTA of your complaint and tracking number — you’ll help APTA advocacy efforts with payers and oversight entities, including CMS.
* **Employer Human Resource Department or Benefit Manager:**
  + Encourage patients to inform their employer of the problem they face with their physical therapy benefits.
  + Patient Template:
    - [**Consumer Letter to Human Resources/Employer**](https://inapta.org/wp-content/uploads/2021/02/Template-letter-consumer-to-employer_.final_.docx)
* [**Indiana Department of Insurance**](https://www.in.gov/idoi/2547.htm)**:**
  + Submit a complaint either in writing or through an online form.
  + File a Consumer Complaint:
    - [Online Form](https://www.in.gov/idoi/2552.htm)
    - [Printable Fillable Form](https://www.in.gov/idoi/files/Complaint%20Process%20Letter%20and%20Complaint%20Form.pdf)
  + File a Provider Complaint:
    - [Online Form](https://www.in.gov/idoi/2683.htm)
    - [Printable Fillable Form](https://www.in.gov/idoi/files/Complaint%20Process%20Letter%20and%20Complaint%20Form.pdf)

1. [​Inform APTA Indiana of Ongoing Issues](https://www.in.gov/idoi/files/Complaint%20Process%20Letter%20and%20Complaint%20Form.pdf):

* APTA Indiana members or nonmembers, including representatives from your department (ie, billing department…), may report ongoing issues to [andrealausch@inapta.org](mailto:andrealausch@inapta.org).
* Information will be kept confidential, be used to track the problem, help build a database of case examples to provide oversight entities as needed, advocate for patient access with Anthem, and communicate with APTA to assist in their advocacy efforts.
* Please Complete the [AIM Survey](https://www.surveymonkey.com/r/B83FDQW):
  + This survey has 7 questions focused on identifying ongoing patient access issues, quantifying provider administrative burden, and collecting case examples.