



February 25, 2021

Anthony Duncan  
Director of Network Management, National Contracting  
Anthem  
9133 W. Russell Rd.  
Las Vegas, NV 89148

**RE: Notice of material change in reimbursement in Virginia During the COVID-19 Public Health Emergency**

Dear Mr. Duncan:

**On behalf of the American Occupational Therapy Association, American Speech-Language-Hearing Association, American Physical Therapy Association, APTA Virginia, AOTA Virginia, ASHA Virginia and the APTA Private Practice Section, we respectfully request that Anthem Blue Cross Blue Shield - Virginia reconsider the unilateral material change imposed on providers on or around October 1, 2020. The change was implemented in the absence of written or electronic notice via Availity, as required by contract, and impacts rehabilitation providers predominantly in the rural counties of central Virginia.**

We appreciate the steps that Anthem has taken to improve access to care during the pandemic, including expanded coverage of telehealth services. Telehealth helps to overcome access barriers caused by distance, lack of availability to specialists and/or subspecialists, and impaired mobility; and it can prevent unnecessary exposure during a pandemic or epidemic. Nevertheless, the public health emergency is not over. A material change in the provider agreement at this time is inadvisable and will further endanger practice survival and patient care, particularly in underserved areas.

The impact of the public health emergency has been felt far and wide. Rehabilitation specialists across the country continue to wrestle with how best to foster access to care during this protracted emergency. [APTA's most recent report](#) illustrates the challenges encountered by rehabilitation practices. What cannot be adequately surveyed is how patient progress from, and access to, cost-saving rehabilitation continues to be imperiled during the public health emergency.

It is clear that individuals throughout the country have been using the health system less frequently, which means decreased revenues for already-reeling rehabilitation practices and a fundamental decline in health for the U.S. population. The Kaiser Family Foundation [reported](#) that U.S. expenditures on health care actually decreased from 2019, which has not occurred since the 1960s, when data collection was initiated. The decrease has been most pronounced in outpatient and elective services and focused in rural and underserved areas. In addition, nearly 17 million Americans have lost their employment, adding another tremendous cost to monthly bills if individuals are forced to extend coverage through COBRA or pay for needed services out of pocket.

In certain areas of the country, access to care was poor before the pandemic began. The practices subject to Anthem's recent actions include central Virginia, a rural region where the number of available

providers and those offering specialty services is limited. If providers make the business decision to terminate their agreement, we are concerned that Anthem enrollees already staggering from the impacts of the pandemic will experience a further decline in access to care due to an inadequate network of providers.

Our associations are not privy to the full language in the practice contracts with Anthem Blue Cross Blue Shield - Virginia. Nevertheless, section 9.11 was shared, and it clearly requires that notice be provided in writing prior to any material change. APTA membership indicated that the majority never received such notice and only discovered the alteration after the fact when reconciling monthly claims. Our organizations question the underlying rationale of making such a change during a pandemic that continues to spread throughout the country. Anthem chose an inopportune time to take this action. In addition, by unilaterally imposing a material change without the required notice, Anthem Blue Cross Blue Shield - Virginia prevented practice owners from making an informed business decision whether to continue to participate in the agreement under the new terms.

The individual practices impacted by this adverse change will communicate directly with Anthem on their related contract concerns and financial impact on their business.

Maintaining coverage to include rehabilitation services will reduce overall health care expenditures, increase patient access, and improve management of chronic disease and quality of life, particularly in rural and underserved areas. We urge you to rescind the material change in the agreement, to ensure continued access to care in Virginia during and after the pandemic. If you have any questions please contact Elise Latawiec at APTA, [eliselatawiec@apta.org](mailto:eliselatawiec@apta.org).

Thank you for your consideration.

Sincerely,



Sharon L. Dunn, PT, PhD  
Board-Certified Clinical Specialist in Orthopaedic Physical Therapy  
President, APTA



Michael Joseph Horsfield, PT, MBA  
PPS President



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