NATA Third Party Reimbursement Pilot Project
Wisconsin State Report
August, 2016

Summary of Activity

The Wisconsin State Business Development activity in the month of July and August to date has focused upon the following objectives.

1. Payor Developments

A presentation to be used for presentation to payors has been created. It will be updated as indicated for payor discussions.

a. State of Wisconsin Medicaid Office
   Scott Stenger and Matt Phillips have secured a second meeting with the State of Wisconsin Office of Medicaid and their Director, Kevin Moore. This meeting will occur on 8/15/2016 @ 10:00 AM. We will be formally asking the Office of Medicaid to recognize rehabilitation services delivered by athletic trainers in an outpatient rehabilitation setting.

b. Anthem Blue Cross and Blue Shield of Wisconsin
   Kyle Scharer is communicating and working with implementation representatives of Anthem Blue Cross and Blue Shield to create an FAQ for athletic trainers and employers who wish to use athletic trainers as outpatient rehabilitation providers. It will include information on what this means and the steps a system and/or an athletic trainer need to make. The goal for distribution of this information is 9/1/2016.

   During a second face to face meeting with Anthem leadership on 7/12, we were informed that Anthem Blue Cross and Blue Shield of Wisconsin would begin for formally recognize and reimburse for rehabilitation services delivered by athletic trainers in outpatient rehabilitation settings beginning with new contracting initiating now and throughout the fall. This is obviously a very positive development from a major commercial payor.

   Although not a requirement for athletic trainers who will be doing hospital or facility based billing, they would like athletic trainers who are billing to become credentialed by CAQH. AT’s billing independently will need to be credentialed by CAQH. Anthem, as well as WATA leadership and likely NATA leadership believe that this is positive as well. The more AT’s that are credentialed by CAQH, the easier it will be for the future as more payors come on board.

   Anthem has indicated that they will use OrthoNet for prior authorization services. This is consistent with the process in Indiana.

   We are also monitoring the Anthem/Cigna merger and considering the effect on our efforts which should be an overall positive.
c. United Healthcare
Both Joe and Kyle have reached out to Dr. Bruce Weiss after Kyle has facilitated initial communications with their Medical Director. We have shared the developments with Anthem. We have not received a reply at this point, but will continue to request meetings and recognition. Dr. Weiss may be taking on a larger national role and the decision for United is not a state based decision.

d. WPS and WEA
Joe has continued to reach out to WPS and their Medical Director, Michael Ostrov. We are waiting for communication back from him. We will be reaching out again to WEA.

Prior authorization requests can be made for WPS and WEA via the HSM/Magellan portal: [https://www.hsminc.com/login.asp](https://www.hsminc.com/login.asp)

Joe has been in communication with Magellan during his discussions relating to Dean as an effort to educate Magellan as they provide prior authorization service for both WEA and WPS as well.

e. Dean Health Plan
Dean Health Plan is reviewing their policy specific to athletic training but no time frame has been communicated. We have requested this review to allow for Dean Health Plan update their policy with language consistent with the current practice act and the amendments that went into effect in April, 2010. **We do not have a timeline at this time despite our requests.**

This advocacy is ongoing and active at this time. Multiple sites have indicated that Dean Health Plan patients have been denied as they have not been “athletes” or because they had surgery which was not an athletic injury. Obviously, this is not consistent with State of Wisconsin Scope of Practice for an athletic trainer. The athletic trainer can see individuals who participate in vigorous “physical activity” of most any type and also treat individuals who desire to return to said activity after a surgical procedure.

We have been in communication with Magellan specific to Dean Health Plan, and have received confirmation from both that they are communicating and that they will await a response from Dean Health Plan on their policy review. The third party prior authorization providers are becoming increasingly important to target with educational efforts. We believe that assisting Magellan and Dean now will be valuable as other payors come on-line, and with WPS/WEA.

f. Magellan
We have learned that Magellan purchased HSM in November of 2015. HSM had provided prior authorization services for WEA/WPS as well and services are now prior authorized by Magellan as well. This said, the priority of communicating and educating Magellan has increased. Please see the comments above specific to Dean Health Plan.
We are actively working to educate Magellan as issues with reimbursement that are present now, were not present prior to Magellan taking over prior authorization processes for Dean Health Plan.

**g. Unity and Gundersen Health Plans**
The proposed merger between the Unity and Gundersen Health Plans has been approved by the State of Wisconsin. This may be a nice positive development in the western aspect of the state as Unity recognizes athletic training services already. Please stay in touch for additional updates as more developments occur and we begin to understand more of the specifics.

**h. Aetna/Humana**
We will be re-engaging with Aetna/Humana to learn more about the status of their merger and who it would be best to communicate with in the near term.

**i. Worker’s Compensation**
Sites are encouraged to initiate and continue to bill workers compensation payors as they initiate and establish third party reimbursement activity.

We are moving into the new phase of assisting sites with implementation over the next 18 months. Steve has actively been communicating with at least 6 news sites. Some of which would be critical precedents.

2. **WATA Pilot Site Progress**

Although the ending date of 6/30/2016 for the pilot has arrived, pilot sites are being asked to still collect revenue and outcomes data through September on patient seen from 7/1/2015 – 6/30/2016 to allow for all collections to occur and for the majority of discharge outcomes surveys to be obtained on patients that were seen in the pilot timeframe.

More new soon on utilization, publication, and distribution intent.

3. **2016 WATA Third Party Reimbursement Symposium Planning**

Preparation continues for 2016 WATA Reimbursement Symposium to be held on Friday, November 11th and Saturday, November 12th, 2016 in Milwaukee at the Potawatomi Hotel and Convention Center.

We have just received confirmation from Christina Gerdes, State of Wisconsin Director of Contracting and Payor Relations for the Mayo Clinic Health System on her intent to speak.

Registration is now live and the educational program is nearly complete. You can register via the WATA web presence at the following link:

We are advertising the event across the NATA to state leadership and to committee leadership to include CAATE, BOC, ECE, COPA, and many other entities. We are also looking at advertising in the NATA Range of Motion on-line newsletter.

4. Governmental Affairs

WATA leadership and its advisors continue to monitor progress with third party reimbursement activity and consider potential practice act implications dependent upon progress with payors. Joe participated along with others in WATA Leadership in a WATA Governmental Affairs Strategic Planning session on 8/4/2016 at Stenger Government Relations.

5. Epic Foundation System

Joe is working with Epic Foundation representation to insure that appropriate athletic training codes, consults, and documentation templates are present within the Epic Foundation System. We have received word that the enhancements specific to athletic training will go live in September. Release notes will be published specific to this for Epic client analysts to utilize. Please look for more information soon.

What will be included:

- Athletic trainer will be included as a specific provider within Epic consistent with PT, OT, PA, RN, etc. This means that an athletic training user and template will be included in Foundation. This was not present previously.
- Relevant Coding specific to athletic training services
  - 97005 and 97006 are already in Foundation
  - Via Epic, Revenue Code 951 apparently is provided via third parties as are other revenue codes and is not in Foundation, but should be used.
- Athletic Training Evaluation and Re-Evaluation Documentation templates
- Athletic Training Consult and Physical Therapy or Athletic Training Consult

6. WATA Web Presence

Joe Greene and Kyle Scharer continue to meet with Alyson Kelsey, WATA Website Coordinator to discuss content that will be included on both the OrthoVise and the new WATA web presence. We will be transitioning content from the OrthoVise Web Presence to the WATA web presence specific to third party reimbursement activity. This content will be redundant on both sites in some cases.

Alyson will be placing information on the payors that recognize athletic training services with prior authorization or fully recognize. This is an example of Wisconsin specific content on the web presence that will have real time insurance information and employer information. Additionally, we will link to NATA web content that is currently in development.

7. Education and Communication

Joe Greene presented on Friday, June 24th at the 2016 NATA Annual Meeting specific to the Wisconsin Story of Athletic Training Third Party Reimbursement. Joe is working to secure time on the RWHC
meeting this fall to follow up on previous communication with the RWHC rehabilitation directors and provide an update.

Joe has recently posted information on Anthem and on Epic via social media on Twitter and Facebook. This has received a great deal of positive attention.

8. Data Accumulation

Kyle Scharer continues to accumulate and maintain data from our known sites that are using athletic trainers in reimbursable capacities. AT’s are encouraged to communicate with Kyle on any changes.

9. Publication Considerations

We will be intending to publish our pilot data in either the Journal of Athletic Training or Athletic Therapy Today. There are other possibilities to consider, but these are the most likely peer reviewed options. The goal is to submit in the Winter of 2017 after pilot data has been fully secured.
Wisconsin Third Party Reimbursement Pilot Site Status

Data Summary

The data presented below represents data collected through May, 2016. It includes all available revenue, collections, and outcomes data to date. We will be requesting a final report from all sites on 9/15/2016.

Pilot Sites
1. Aurora BayCare
2. Baldwin Area Medical Center
3. Columbus Community Hospital
4. Fort Healthcare
5. Grant Regional Health Center
6. Portage Divine Savior Hospital

Metrics
Each of these sites gave standardized their collection of metrics. These metrics include:
1. Overall gross charges and net reimbursement
2. Reimbursement rate by payor group (ie. Commercial, HMO, Workers Compensation)
3. Reimbursement rate compared to similar providers
4. Tracking of payors that deny payment
5. Tracking of payors that authorize payment
6. Functional and clinical outcomes

Pilot Site Data
1. Functional outcome data
2. Aggregated revenue data across all pilot sites
3. Employers that utilize athletic trainers as autonomous rehabilitation providers
4. Commercial and Workers Compensation payors that recognize athletic training services
5. Payors that have denied payment

Functional Outcomes of Patients
These tools have been used by our pilot sites to measure the effectiveness of the intervention by an athletic trainer.

<table>
<thead>
<tr>
<th>Tools Used</th>
<th>Pre-Intervention</th>
<th>Post Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuickDASH</td>
<td>68.5</td>
<td>12.4</td>
</tr>
<tr>
<td>Lower Extremity Functional Scale</td>
<td>54%</td>
<td>79%</td>
</tr>
<tr>
<td>Patient Specific Functional Scale</td>
<td>2.34</td>
<td>8.41</td>
</tr>
<tr>
<td>Patient Specific Functional Scale</td>
<td>46%</td>
<td>89%</td>
</tr>
<tr>
<td>Lower Extremity Functional Scale</td>
<td>40%</td>
<td>69%</td>
</tr>
<tr>
<td>PENN Shoulder Score:</td>
<td>48%</td>
<td>88%</td>
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</table>
### Revenue Data by Payor Group

<table>
<thead>
<tr>
<th>Revenue Data by Payor Group</th>
<th>Commercial</th>
<th>WC</th>
<th>Self Pay</th>
<th>Other</th>
<th>AT Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Charges:</td>
<td>$ 789,369.91</td>
<td>$ 237,482.73</td>
<td>$ 1,169.00</td>
<td>$ 12,669.00</td>
<td>$ 1,098,927.75</td>
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<tr>
<td>Net Reimbursement:</td>
<td>$ 528,554.00</td>
<td>$ 192,750.35</td>
<td>$ 1,087.16</td>
<td>$ 12,669.00</td>
<td>$ 758,851.83</td>
</tr>
<tr>
<td>Net Reimbursement Rate:</td>
<td>67%</td>
<td>81%</td>
<td>93%</td>
<td>100%</td>
<td>69%</td>
</tr>
</tbody>
</table>

### Revenue Data by Code

<table>
<thead>
<tr>
<th>Revenue Data by Code</th>
<th>97005</th>
<th>97016</th>
<th>97032</th>
<th>97083</th>
<th>97035</th>
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</thead>
<tbody>
<tr>
<td>Gross Charges:</td>
<td>$ 147,313.20</td>
<td>$ 420.00</td>
<td>$ 312.00</td>
<td>$ 25,805.00</td>
<td>$ 52,066.00</td>
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<tr>
<td>Net Reimbursement:</td>
<td>$ 102,014.52</td>
<td>$ 193.83</td>
<td>$ 208.00</td>
<td>$ 19,851.34</td>
<td>$ 44,585.84</td>
</tr>
<tr>
<td>Net Reimbursement Rate:</td>
<td>69%</td>
<td>46%</td>
<td>46%</td>
<td>67%</td>
<td>74%</td>
</tr>
</tbody>
</table>
Employers
These employers utilize athletic trainers as autonomous providers of rehabilitation services.

Columbus Community Hospital
Divine Savior Healthcare
Grant Regional Medical Center
Prairie du Chien Memorial Hospital
Prevea Healthcare
Ripon Medical Center
St Clare Hospital
UW Health
Aurora BayCare
Commercial Payor Status

Full Recognition
Payors that formally recognize rehabilitation services delivered by athletic trainers.

Anthem Blue Cross and Blue Shield of Wisconsin
Dean Health Plan
Unity Health Plan
Physicians Plus Health Insurance
BayCare Clinic (Self Funded Plan)
FortCare Cerner (Self Insured Plan)
Sysco (Self Insured Plan)

Reimbursement with Prior Authorization
These payors have recognized athletic training services when prior authorization has been secured. Payment approval is inconsistent and denials are likely or common if you have not obtained prior authorization.

Cigna
Group Health Cooperative
Health Partners
Humana
Medica
United
WEA
WPS

Workers Compensation Payors That Recognize Athletic Training Services
Workers compensation payors generally recognize rehabilitation services delivered by athletic trainers.
Payors That Have Denied Payment

<table>
<thead>
<tr>
<th>Payor Denials (14)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assurant Health</td>
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<tr>
<td>Anthem Blue Cross and Blue Shield of Wisconsin</td>
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<tr>
<td>Blue Cross and Blue Shield of Minnesota</td>
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<tr>
<td>CompCare</td>
</tr>
<tr>
<td>Dean Medicaid HMO</td>
</tr>
<tr>
<td>Humana</td>
</tr>
<tr>
<td>UMR</td>
</tr>
<tr>
<td>UMR Salt</td>
</tr>
<tr>
<td>Medica Applause</td>
</tr>
<tr>
<td>Medica Choice</td>
</tr>
<tr>
<td>Medica Passport</td>
</tr>
<tr>
<td>MercyCare Medicaid HMO</td>
</tr>
<tr>
<td>SelectCare</td>
</tr>
<tr>
<td>WPS</td>
</tr>
</tbody>
</table>
Wisconsin NPI Initiative Update

We have currently met 2015 goals for NPI attainment by WATA Membership

- Athletic Trainers Actively Licensed in WI = 1136 (1000)
- Athletic Trainers Actively Licensed in WI with NPI = 678 (622)

- WATA Regular Members = 666 (613)
- WATA Members with NPI in WI = 423 (405)
- 63.5% (66.1%) of WATA Membership
- 2016% goal of 75% has not been exceeded

- WATA Student Members = 168
- WATA Student Members with NPI = 18
- WATA Student Non-Members = 40
- 11% of WATA Student Membership

*2015 Data in Red for Comparison
Recommendation for NPI Automation with BOC

Social Media Initiatives

We continue to roll out our communication plan and establish our social media platform. In the last WATA E-Blast, members were encouraged to track the progress and hear news of our third party reimbursement initiatives via the following mechanisms.


2. Twitter: Follow us via @joegreeneov

3. Facebook: Search for OrthoVise or follow the link below and Like us. https://www.facebook.com/pages/OrthoVise/335420689882742

4. LinkedIn: Search company pages for OrthoVise, or follow the link below and Follow us. https://www.linkedin.com/company/orthovise?trk=biz-companies-cym