

Jim Freeburg  
[rulescoordinator@oic.wa.gov](mailto:rulescoordinator@oic.wa.gov)  
Office of the Insurance Commissioner

On behalf of the Washington State Massage Therapy Association, we would like to thank you for the opportunity to provide feedback on the prior authorization process for massage therapists and their patients.

Evicore, formally known as CareCore National, who is subcontracted by Premera and Regence for the prior authorization process, requires a scheduled appointment (for patient) in order to apply for further authorizations. But, Evicore does not accept requests for authorization until 7 days prior to the next scheduled appointment. If authorization is denied, and the client chooses to cancel the appointment, the time frame is so short that the client may be liable for a cancellation fee to the provider. If the next appointment is more than three weeks away, by the time the application is accepted, the clinical findings from the last appointment are considered out-of-date, which leads to a denial. This is an unnecessary burdensome time frame that seems designed for denials.

Evicore does not allow tracking of multiple symptoms. It is common for Licensed Massage Therapists, (LMT's), to receive referrals and work on multiple pain sites which may or may not be related. Currently, the Evicore process requires LMT's to only work one area, finish treatment, and then start up with another area. This is impractical and cost inefficient for both the patient and the insurance company.

We request prior authorization submissions be accepted at any time, as many LMT's have to do their paperwork after business hours and on weekends. Also, we request a time frame of 45-60 days after prior authorization within which treatments must be completed. Often, weekly 1 hour massage treatments over at least 6-8 weeks, depending on severity, are most effective for resolution of a condition.

Insurance companies should be required to note in their explanation of benefits that prior authorization is required. Many patients choose plans because of their perceived generous massage benefits, and are not clear that those benefits are not readily accessible.

We would also like to echo the many concerns other providers and provider groups expressed at the recent OIC meeting held on August 10, 2016, in particular, the comment calling out the fact that the prior authorization requirement is adding a substantial amount of administrative cost to the provider without any additional reimbursement.

Thank you for considering our comments,

The WSMTA Board of Directors  
Marybeth Berney, President  
Amy Thomason, Vice President  
Carl Wilson, Treasurer  
Julie Onofrio, Secretary  
Teri Green, Director  
Susan Rosen, Director