

## **Important information for all patients regarding changes in insurance coverage in 2010:**

*The following letter was sent recently to various officers of Anthem Blue Cross of California as well as several newspapers and state government entities. The letter protests drastic reductions Blue Cross intends to make to its reimbursements to providers of Physical Therapy, Occupational Therapy, and Speech Therapy. To date, Blue Cross has not informed any of its subscribers of the intended reductions, to take effect February 1, 2010. In the meantime other carriers are planning similar cuts. At the end of this letter are several entities you can contact to voice your concern. We also ask that you forward this letter to your Human Resources Department.*

Dear Mr. McBride (Vice President, Health Care Management & Services, Southern CA Health Services Area, Wellpoint):

My name is Evan Handler, and I'm probably best known to most people as one of the stars of the HBO television show (and the films) "Sex and the City," along with Showtime's current hit "Californication." As such, I'm sure you've been able to predict, I receive health care insurance coverage through Screen Actor's Guild, from Anthem Blue Cross of California.

I'm also a very long term survivor of acute myeloid leukemia, diagnosed in 1985, and treated (and cured!) via autologous bone marrow transplant in 1988. I've published two books about the ordeal and its aftermath, "Time on Fire: My Comedy of Terrors," published by Little, Brown and Co. in 1996, and "It's Only Temporary: The Good News and the Bad News of Being Alive," published by Riverhead Books in May of 2008. One of the goals I set for myself, in deciding to walk the very difficult and dangerous path of bone marrow transplantation in the 1980's, was to continue to exist as an example to others of what is possible. As a result of my film and television work, through the publication of my books, by continuing to comment on healthcare and other issues regularly as a contributor on Huffington Post (as well as through appearances on The View, The Ellen Degeneris show, with Conan O'Brien, Regis and Kelly, and writings for ELLE, and USA Weekend, and others), and via an active life on Facebook and Twitter, I'm very gratified to have become a visible symbol, and an inspiration, to...well, to millions. I'm approached by dozens daily for advice, I'm followed closely by hundreds every hour, and my postings are read by tens of thousands within an hour, and over a million within a few days. I'm no Lance Armstrong, but when I make one of my regular appearances to speak at his foundation events, I like to joke that I'm at least the second most famous cancer survivor in the room - and possibly one of the most visible, and vocal, in the world.

I'm writing you today not only as a Blue Cross participant, but as someone deeply interested in the well being, and the fair treatment, of others who might need adequate coverage for their health problems, and who might not have as many ears tuned into their cries as I've been fortunate to have. One of those is my daughter, Sofia, who is three years old, and who continues to struggle with delays in gross motor skill development, due to hypotonia and sensory processing challenges. Sofia has been receiving regular physical and occupational therapy sessions at Can Do Kids, Inc. in Los Angeles, CA - sessions recommended by every one of the

many pediatric specialists we've brought her to. The staff at Can Do Kids is uniformly expert, and, while her needs are great, Sofia is among the least challenged of their clients. So it's been deeply concerning to me to learn, via the physical therapy community of providers and consumers, that Blue Cross intends to dramatically change its reimbursement methods for physical therapy, occupational therapy, and speech therapy as of February 1, 2010, capping reimbursement at \$75 per visit, regardless of the treatment provided or its intensity. (It's probably not necessary for me to point out that the "changes" Blue Cross intends to implement will cost patients and families more, and pay providers less, than current reimbursement methods. In fact, I am highly familiar with the Explanation of Benefits for services with Can Do Kids, and this revised payment model represents a 57% decrease in service payment below their particular contractual rate for each hour of therapy.)

But the intended changes will have far greater impact than just to me and my family's chosen therapists. Some of my concerns, beyond my own family's needs, as communicated to me, are that the announced reductions amount to a 25%-200% reduction in payment based on various practice settings. This is unconscionable. The new rate does not appear to take into consideration the one-on-one care that is required by physical, occupational, and speech therapists to effectively treat a patient. On a simply economic level, lower payment will translate into shorter, less effective treatment sessions, and most likely lead to greater lengths of stays (or numbers of visits) in order to achieve the desired functional outcomes - unless functional outcomes are no longer a goal for Blue Cross. This does not make sense from any medical, or business, standpoint. Furthermore, Anthem Blue Cross has apparently increased its premiums to business owners to insure employees by as much as 30% for 2010, at the same time that they are reducing payments to providers. Blue Cross must understand that specialty providers, such as Can Do Kids, simply won't survive these cuts. This will leave families with no superior choices to some of the poorer programs I have personally experienced (some of them at world renowned medical centers), and will therefore negatively impact the care received by much of the insured population.

I do not see how this is consistent with the first sentence of Blue Cross's statement of Mission and Philosophy, which Blue Cross's website states: *Our mission is to improve the health of the people we serve.* I am not able to decipher (and I don't expect many would be) how cutting payments to physical, occupational, and speech therapists by 25%-200% will improve the health of anyone.

An especially egregious note in the implementation of this plan can be found in the letter sent by Blue Cross to PT, OT, and ST providers, which states the hope that "these changes will be viewed by our therapy providers as exciting and positive." Actually, my PT and OT provider finds the changes to be horrifying, and I'm in agreement with them. They, and I, find the language of the letter to be offensive (as well as potentially embarrassing to Blue Cross).

I've certainly had issues with some of my own health insurance coverage and practices in the past. In my long struggle to remain alive in years past, and to remain healthy since, it's been deeply frustrating to have to fight through bureaucratic processes that have sometimes seemed to automatically deny coverages I was entitled to, forcing me to repeatedly write letters of appeal (every one of which was resolved in my favor, interestingly enough). But I've always kept my

own wrangles and tangles with Blue Cross as a private matter, between the company and myself. The current changes that Blue Cross intends to make, however, will not allow me to do that. There is too much at stake, for too many people. As the current political and cultural climate makes clear, American healthcare consumers are in no mood to be denied adequate coverage for their legitimate healthcare needs at the precise moment when they're most vulnerable and in the greatest need - meaning, when they, or a family member, are ill, or injured, and in need of help. I think Blue Cross's proposed changes are wrong and short-sighted, that they will do real harm to thousands of people who are already hurting, and - if implemented - will do grave harm to the company, as well, in terms of public perceptions, and eventual lost contracts. I strongly urge Blue Cross to reconsider these intended changes, and to communicate quickly to the PT, OT, and ST communities, along with those they serve, a change of plan, and a change of heart.

It's painful to say, and it'll be inconvenient and time consuming to do (as it's probably annoying to read) but, in the meantime, I intend to do everything I can to let as many people as possible know about Blue Cross's intentions in regard to these adjustments in reimbursement methods (see CC list below). I am going to make certain that every reader of Huffington Post (approximately 1.8 million readers each day), and every Screen Actors Guild member, and every cancer survivor in my vast network, along with every fan of "Sex and the City" (about ten million American women in that camp) is alerted to this drastic cutback in benefits being implemented by Blue Cross. I intend to share with them the insensitive and self-serving language of Blue Cross's letter, to alert them to impending reductions in coverage that Blue Cross has not made its paying members aware of, and to encourage them to compare these changes with the benefits enjoyed by those covered by competing companies. Most crucially, I intend to instruct them all to alert their unions and employers, their private and state universities, that they do not want Blue Cross as their health insurance provider, because Blue Cross does not intend to provide for them adequately, or appropriately.

I hope the message I plan to put out proves to be unwarranted. I hope Blue Cross realizes that such a reduction in coverage for those needing ongoing therapies is a bad choice, that it shows bad form, that it's a display of bad citizenship, and that it's - most of all - bad business. However, based on the communication sent from Blue Cross to its contracted PT, OT, and ST providers, I feel it's essential to issue it.

Sincerely,

Evan Handler

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