



3501 W Osborn Phoenix Az 85019 602-272-1162 Ext 116

Date: July 6th, 2022

Pertaining to the June 30th Public hearing:

Addressing the Proposal for the 2022-2023 Physicians and Pharmaceutical Fee Schedule.

Dear Charles Carpenter,

I, Robin Wicktor, Representing MBI Industrial Medicine have prepared some written comments regarding the 2022-2023 Physicians Fee Schedule.

In reviewing the Proposal, we were hoping to see some needed changes in the proposal to help with the NEW processes that have evolved with the COVID conditions. The COVID conditions have created many complications with everyone working from home and not being able to get the communications necessary with handling the claims.

1. MBI has had many problems with the claims not being paid in accordance with the rules of the fee schedule. MBI has found that the Days outstanding used to run around 72 days. Records show that we are now on average, Past 90 days outstanding. The Insurance companies have been notified and re-billed, still with no response and nonpayment. The fee schedule gives a time frame, but it does not give any way for recourse. We have notified the insurances of the lateness of payment and that interest is due with no response. Having the adjusters working from home has caused many delays with no way to reach them.

How can this be rectified? MBI has clinics in Colorado, and we have found that the Colorado fee schedule allows for them to file a complaint with the State, and the State gets involved in resolving the matter. The Colorado MBI recently received over \$50,000.00 from an insurance company for their negligence. Arizona does not have any platform for this and is in need of one. At one time we had the ability to provide the information of the negligence of the Insurance companies and Per Cathy McLeod, a consult for the Industrial Commission, we were given instructions on how to File a letter of dispute, to Laura McGory, Director.

I have attached claims for examples that were past the time frame for payment. I have also attached the instructions that Cathy had given us. They are Labeled Attachment #2, #3 and #4. For examples of what we were able to do in the past.

2. MBI is finding that the Insurance companies are making Keying errors on our claims in their systems. When they do this, they then short pay our claims. When we appeal to get the claims corrected and paid correctly, they ignore us and will not fix the claim or pay it. What is our recourse for Insurance errors?

I have attached examples of these for your review.

3. MBI has also had a lot of issues with "DENIED Claims". The Insurances are not excepting the claims, instead they put them in an Investigation status and then they wait several weeks and eventually they denied the claims. In the meantime, we are treating the patient. There are no letters sent accepting or denying the claims. We get no information until we contact them for either a referral/Authorization or on an appeal. We have no recourse, nor do we ever get paid from the patient. The State of California has the insurance to pay up until the denial is given to

help control the misuse of the Insurances in these situations. We are asking for the same for the state of Arizona.

I have attached examples of these types of claims.

The insurances have taken advantage of the nuances that COVID has created. Due to the changes in the Work from home environments, there needs to be new rules to keep up with the problems that this has caused. Patient care should be 1st and foremost, but not having the funds to promote the care needed because of the loop holes the insurance use to delay, and literally not pay claims. Does not provide the environment necessary for the Patient care that should be expected.

To Re-Cap what we are hoping to see in the 2022-2023 Fee schedule.

1. Recourse on how to get the Interest paid from Insurances that ate not paying per rules of the state.
2. Rules on what is expected from the Insurance when the make keying errors and a time frame in which they need to resolve and acknowledge the error so as not to underpay the claim.
3. Rules on putting claims in under investigation, tighter frames on accepting a claim, with letters being sent out. Requirements of the insurance to pay up unto denials to help the misuse of this activity.

MBI Industrial Medicine

Robin Wicktor

Director of Administration

r.wicktor@mbiaz.com