

Horizon's new cost-cutting plan raises fear that trips to chiropractor may be limited

August 12, 2019

By [Susan K. Livio | NJ Advance Media for NJ.com](#)

Armed with data that says New Jerseyans are among the most frequent users of chiropractic care and physical therapy in the nation, the state's largest health insurance company says it intends to team up with a national claims reviewer to scrutinize patient bills in the coming year.

Horizon Blue Cross Blue Shield of New Jersey sent out letters in the past week to the thousands of licensed acupuncturists, chiropractors and occupational, physical and speech therapists to alert them to the company's proposed partnership with American Specialty Health Network, a national utilization review company.

The move immediately raised fear from therapists and chiropractors that the insurer intends to limit how many times patients can see them.

They wasted no time firing off letters to the state [Department of Banking and Insurance](#) to ask regulators to block the arrangement. And they started alerting their patients and state lawmakers about how the company's partnership with an insurance carrier serving 3.7 million people in the state will discourage treatment and undermine their livelihoods.

"This is going to add a tremendous amount of administrative work to get people's care approved. What is going to happen is patients are going to be frustrated with the delays and not seek the care they need," said Michael Goione, a chiropractor with a 30-year practice in Red Bank.

Goione said he understands there are some "over-utilizers" in the field of physical medicine. Horizon should focus its energy on policing them, he said.

"People need time to get well. This is more difficult to manage. I understand that. But this is not about managing care, it's about limiting it," he said.

A Horizon spokesman said the criticism against ASH unfair and inaccurate.

"The claim that there will be any change to the benefits Horizon members have for chiropractic, acupuncture, occupational or physical therapy care is absolutely false," Horizon spokesman Tom Vincz said. "The terms of every member's coverage remain the same — there is no change in cost-sharing responsibilities and no new limits imposed on the scope or frequency of visits for Horizon members."

Patients will see no difference for the first five treatment visits in 2020. But on the sixth visit, the company may conduct "a medical necessity determination review" and

if necessary, ask the medical provider for more information, according to the letter Horizon sent last week.

Vincz said the company's work with Cigna provides a good example of how ASH operates.

Last year, the company reviewed claims and required more information from 1,187 patients out of 12,000 receiving care, according to information providers by Horizon and ASH. "In other words, more than 90 percent of patients received care without providers needing to do anything other than treat their patients," a statement from the companies said.

Vincz said he did not have statistics on how many resulted in denied claims.

"ASH has a proven track record of working collaboratively with providers — both here in New Jersey and across the nation — who are committed to providing value-based care and ridding the health care system of ineffective care that provides no real benefit to a member," Vincz said.

Claims data analyzed Milliman, an international actuarial company, showed chiropractic utilization rates in New Jersey are double the recommended amount by professionals in the nation. Physical therapy visits were 90 percent to 140 percent higher, Vincz said.

ASH and Cigna made headlines in the spring when it paid a \$11.75 million settlement to resolve a multi-state, class-action lawsuit by chiropractors — including two from New Jersey — whose patients were denied claims. ASH and Cigna admitted no wrongdoing, according to [the Illinois Chiropractic Society](#), which announced the settlement.

Amy Boright Porchetta, executive director for the Association of New Jersey Chiropractors, said she hopes Banking and Insurance Commissioner Marlene Caride will consider this litigation when it comes time to decide whether to approve the arrangement.

The commissioner should also consider what deterring the use of physical medicine will mean to the state's goal of reducing the over-reliance on addictive painkillers, she added.

"We are in the midst of opioid epidemic...We should be looking to provide greater access to non-pharmaceutical pain management," Porchetta said.

Chiropractors and physical medicine specialists must sign an agreement to join the company's network by no later than Nov. 1 or lose its provider agreement with Horizon, according to a Horizon letter explaining the arrangement.

"I have a lot of anxious therapists. Their livelihoods are at stake," said Brian Mason, president of the American Physical Therapy Association of New Jersey, which represents 10,000 professionals.

“I would envision the smaller private practices will have extreme financial difficulties and go out of business. The best case scenario is this just creates another administrative burden which will be overwhelming,” Mason said.

If approved by the state, the partnership would affect people who receive chiropractic and physical medicine services in a private office, and are covered through the State Health Benefits Program, the School Employees’ Health Benefits programs, Medicare Advantage, OMNIA, self-insured plans administered by Horizon, Horizon EPO, Direct Access, the Federal Employee Program, and the point of service (POS) and preferred provider organization (PPO) plans.

Susan K. Livio may be reached at slivio@njadvancemedia.com. Follow her on Twitter [@SusanKLivio](https://twitter.com/SusanKLivio). Find [NJ.com Politics](https://www.nj.com/politics/) on Facebook.