

September 27, 2017

Craig Samitt, MD  
Executive Vice President and  
Chief Clinical Officer  
Anthem, Inc.  
120 Monument Circle  
Indianapolis, IN 46204

Dear Dr. Samitt:

On behalf of the American Medical Association (AMA) and its physician and student members, I write to express our concerns with Anthem's recent policy in several states to deny coverage of computed tomography and magnetic resonance imaging services performed in hospital outpatient departments. We urge Anthem to reconsider this policy given the potential adverse impact on patients' timely access to medically necessary care.

The AMA strongly supports patients' right to choose their health care providers and advocates for health plans to provide coverage for outpatient procedures at a clinically appropriate site of service as selected by the ordering physician and the patient. By redirecting patients to other sites of care for advanced radiologic imaging, Anthem's new policy interferes with the patient-physician relationship and may disrupt ongoing care coordination.

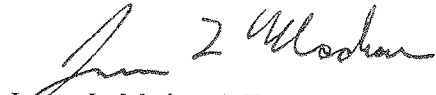
The AMA also has serious reservations regarding the policy's potential impact on timely access to care and health outcomes. Critical imaging services may be delayed while arrangements are made for care at an alternate, approved site of service. We fear that the policy's impact will be greatest on patients living in rural or inner city areas, where hospital outpatient departments may be the only nearby site of service for advanced imaging. These vulnerable patient populations already face significant care access challenges, and the Anthem policy may exacerbate these existing problems through treatment delays and excessive travel times. Moreover, there is a real risk that the alternate sites of service suggested by Anthem may not be able to adequately manage complications experienced by complex patients during imaging procedures. The Anthem policy does allow for exceptions in cases of medical necessity through a prior authorization process administered by AIM Specialty Health. However, this process will undoubtedly result in significant administrative burdens and care delays typical of all prior authorization programs, as detailed by AMA physician survey data and numerous other research findings.

While we understand the concerns with advanced imaging costs that underlie this new policy, we ask you to re-evaluate the long-term effect on patients and overall health care expenditures. Redirection of patients to less costly sites of service may reduce short-term plan expenditures on imaging services. However, if care delays, excessive travel times, and suboptimal management of clinical complications negatively impact patient outcomes, this policy change may result in higher long-term health care costs for patients, instead of achieving the intended savings.

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Thank you for your time and consideration of our request to revisit this policy. We share Anthem's commitment to ensuring provision of quality, cost-effective care to patients and look forward to continuing to collaborate with your organization on this and other important health care policy concerns. If you would like to further discuss this issue, please contact Robert D. Otten, Vice President, Health Policy at [rob.otten@ama-assn.org](mailto:rob.otten@ama-assn.org) or 312-464-4735.

Sincerely,



James L. Madara, MD