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Dear Sir or Madam,

The Virginia Society for Pathology ("VSP"), the sole organization dedicated to representing pathologists in the Commonwealth of Virginia, has heard from its members across the state whom are concerned that Anthem Blue Cross and Blue Shield's ("Anthem") recently announced amendment to Anthem's provider agreement(s), to become effective on September 1, 2019, will significantly erode quality and access to care. Specifically, VSP is concerned that patients who rely on their pathologists for testing and diagnosis will experience a considerable reduction in available services. To date, there has been no public information, announcement, or explanation for the proposed amendment. The magnitude of this unexplained and dramatic change has implications that will negatively affect millions of patients insured by the various Anthem Blue Cross products in Virginia.

VSP requests that Anthem provide an explanation so that it can understand and address the changes in a fully educated and timely manner that takes into account our members' need to ensure patient care, and access. We respectfully ask that Anthem Blue Cross and Blue Shield:

- Explain the methodology for the proposed adjustments to the fee schedule;
- Help the VSP understand the proposed valuation of pathology services specifically as it relates to other clinical services;
- Provide the VSP with information on why this change was initiated;
- Consider and explain the impact of the amendment on health care services and timeliness of care;
- Provide adequate time for dialogue with pathologists to understand the justification for dramatically devaluing pathology professional services in the manner contemplated by the amendment;
- Postpone the implementation date currently set at 9/1/2019; and
- Explain why the value of pathology services as opposed to other clinical services justifies such rapid and drastic reductions.

We believe many Virginians choose Anthem due to its reputation for assuring high-quality care close to home, and we do not believe that the changes likely to result from the proposed amendment are what Anthem customers expect from their health insurance carrier.

The proposed amendment is not just an adjustment reflecting the increasingly challenging economics of health care. To the contrary, it represents a dramatic and disproportionate shift of laboratory services and suggests a fundamental misunderstanding of the vital role pathology and laboratory medicine has in caring for the people of Virginia.



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Most medical decisions hinge on the results rendered in pathology laboratories and pathologists' ability to deliver these critical diagnoses is contingent on access to technical resources, qualified staffing, professional expertise, and close communication with colleagues across other disciplines in medicine to ensure that their diagnoses incorporate the patient's complete clinical picture. This close communication requires local pathologists who are available 24 hours a day, 7 days a week who are able to immediately assist and consult with other treating physicians in their hospital system. As esteemed pathologist Dr. Oscar Rambo noted in 1962: "To render a diagnosis from an inherently puzzling bit of tissue with only vague knowledge of its source and no concept of the clinical problem is as fool hardy as to undertake an appendectomy on the basis of hearsay evidence that the patient has pain in his belly." (Rosai and Ackerman's Surgical Pathology, 10th edition, 2011 pg 10). The access to pathologists who are closely integrated into patient care will be severely imperiled by the proposed amendment, and our members' patients will suffer the consequences. In the world of medicine, one cannot treat what one does not understand, and pathology services are fundamental to that understanding.

How do pathologists decode disease into treatable diagnoses? In the clinical laboratories, pathologists orchestrate a myriad of tests that detail everything from evidence of a recent heart attack to the bacteria responsible for blood and urinary tract infections. In anatomic laboratories, which handle cell and tissue specimens collected from all over the body, pathologists work at the microscope not only to diagnose cancer and other illnesses, but to ascertain the best approach to treating it. In the era of precision medicine, chemotherapeutic options are impacted profoundly by the way pathologists interpret special stains and molecular tests, resulting in a personalized care approach that pairs patients with the best drugs and saves millions of dollars by preventing the unnecessary administration of costly treatments to patients. In this capacity, pathologists are poised to contribute innovative cost-savings solutions to medical care, but only if they are allowed, and indeed encouraged, to remain an integral part of the care team.

The services pathologists provide grow increasingly complex as medical care becomes more sophisticated and treatment options become more nuanced, yet the perceived value of these services (particularly from third-party carriers) has steadily diminished. The reductions contemplated in the proposed amendment will be the most aggressive in history, and are likely to result in closure or considerable reduction in hospital-based pathology services.



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Simply put, this means that Virginia patients will not be able to get the answers they need when and where they need them. The potential impact will be immeasurable not in dollars, but in the health of the citizens of the Commonwealth. Physician pathologists are an integral part of clinical care; care that is optimized by their ability to interact in a direct and timely manner with their patient-facing clinical colleagues. A mass production, low-quality approach to pathology is what led to the Pap smear disaster in the 1980s and ultimately legislation codified in the Clinical Laboratory Improvement Act of 1988. The Pap smear history clearly illustrates that outsourcing anatomical pathology to off-site facilities is dangerous—sometimes deadly—for patients. This scenario may be repeated if Anthem continues down this path. Surely reasonable individuals can find a way to avoid watching history repeat itself in the Virginia patient population.

With this context in mind, VSP asks you to consider the negative impact the proposed Anthem amendment—particularly for Common Procedural Terminology (CPT) codes 88300-88309—will have on health care in both rural and urban areas of Virginia. If implemented, this amendment will erode the high level of care the people of Virginia currently enjoy.

VSP reiterates its request that Anthem Blue Cross & Blue Shield:

1. Explain the methodology for the proposed adjustments to the fee schedule;
2. Help the VSP understand the proposed valuation of pathology services specifically as it relates to other clinical services;
3. Provide the VSP with information on why this change was initiated;
4. Consider and explain the impact of the amendment on health care services and timeliness of care;
5. Provide adequate time for dialogue with pathologists to understand the justification for dramatically devaluing pathology professional services in the manner contemplated by the amendment;
6. Postpone the implementation date currently set at 9/1/2019; and
7. Explain why the value of pathology services as opposed to other clinical services justifies such rapid and drastic reductions.

We look forward to working with Anthem to address these issues and to ameliorate the potential negative impact on patient care, access to care and quality of care in the Commonwealth of Virginia. VSP expects that Anthem Blue Cross & Blue Shield is willing to engage in a productive dialogue over the next few weeks.



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VSP welcomes the opportunity to discuss this in more detail. One of the key components of the practice of pathology is education and VSP invites you to learn more about our specialty and urge you to discuss this change with fellow pathologists in the Commonwealth. VSP looks forward to your response.

Most Sincerely,

A handwritten signature in black ink, appearing to read "Matt Foster", written over a light blue horizontal line.

Matthew R. Foster, MD, FCAP  
Pathologist  
President, Virginia Society for Pathology  
[vapathology@gmail.com](mailto:vapathology@gmail.com)  
(434)-947-3925