Regarding the authorization process for physical therapy appointments covered under medical insurance policies:

My name is Ngan Vo, and my health insurance is the Moda Synergy health plan which allots 60 visits per year for physical therapy sessions. Per my Moda Synergy plan, a prescription by a medical doctor is not required for me to access my physical therapy benefits. I chose my insurance plan based on its stated (not advertised, but stated) benefits. I am writing this letter to highlight the unsafe practice that a third-party company called eviCore, who is contracted by Moda, to authorize physical therapy treatment plans prescribed to me by medical professionals.

In January 2020, I tore my ACL in my right knee, which was documented through multiple doctor's visits and an MRI. In March 2020, I had an ACL repair procedure performed, and my doctor, Dr. Rahul Desai, prescribed a number of physical therapy sessions with Sasha Kolbeck—who has a doctorate in physical therapy—at Rose City Physical Therapy in Portland, Oregon. My doctor reminded me that my medical insurance plan did not require his formal referral for me to be seen by Dr. Kolbeck, but I asked for his referral in any case.

I am incredibly thankful to have been referred to Dr. Kolbeck because she is thorough and professional in her assessment of the current status of my knee and development of an exercise plan to help my knee heal and regain its abilities. Although she clearly had a repertoire of approved exercises that she drew on to help those with ACL injuries (as opposed to shoulder or neck injuries, for example), Dr. Kolbeck also evaluated my progress through each appointment to make sure these exercises were helping me regain use of my knee—rather than just going by rote. With each appointment, she modified or added different exercises so that I might safely and effectively regain the function of my knee.

However, in 2020 after only a couple of physical therapy sessions for my right knee, I received a letter from eviCore that the initial number of physical therapy sessions prescribed to me by my doctor—a person who has a specialty in ACL repair—was being denied because, according to eviCore, I should just be able to do all of my exercises at home, without the professional assessment of my physical therapist. I contested this denial and was still denied by eviCore. I was only able to continue to receive physical therapy after regular and repeated efforts by Dr. Kolbeck to contest eviCore's decisions. This cycle of denial and professional contesting happened again and again and again—throughout 2020 and currently through 2021.

From personal experience, I know that just doing physical therapy exercises at home (as dictated by eviCore) can lead to further injury. In 2016, I had previously undergone surgery to repair an ACL tear in my other knee, my left knee. I ended up re-injuring that knee during my physical therapy stage and required a second surgery. After this second surgery, I was only able to perform the physical therapy exercises at home rather than through regular evaluation by a physical therapist. This knee never fully healed after my second surgery. The most obvious sign

of this was from the fact that my left leg (and gluteus muscle) has consistently been smaller than my right.

From this past experience, it was very clear to me that just doing exercises at home was not a safe route to regain use of my injured knee and could lead to the opposite outcome—further damage and need for additional medical attention. This sounds obvious, but I will still point this out—the knee during a recovery period is still at a vulnerable stage during the healing process and requires professional guidance for healing so that it does not become re-injured.

Over the course of 2020, this left knee was being evaluated by Dr. Kolbeck as she treated my right knee, and since I have regained the use of my right knee, Dr. Kolbeck is finally able to pay attention to my left knee. I'd like to reiterate that this is under the purview of my current Moda insurance plan. Authorization of my physical therapy treatment plan has repeatedly been denied by eviCore, leading to additional rounds contesting eviCore's decisions. This has been truly distressing.

Despite my insurance plan coverage, eviCore's constant insistence that I only need to perform my exercises at home—essentially without guidance from my physical therapist—is unsafe and unethical. The medical insurance authorization procedure is a critical aspect of a patients' medical needs and the wrong decision could lead to future injury to patients. In your consideration of this authorization procedure, please emphasize the expertise of the physical therapist—professionally trained in their discipline with extensive knowledge of their field and their patient's progress—as the deciding factor.

Sincerely,

Ngan Vo

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