

Doctors are fed up with insurance company

by DEVIN COMISKEY

Town health care providers struggle with Oxford

Add Wilton Medical Associates to the growing list of local medical facilities no longer participating in Oxford Health Care plans.

In a blunt letter highly critical of Oxford's practices sent to patients dated April 15, signed by Drs. Arthur D'Souza, Nancy Gade, Steven Glazer and Varshapriya Iyer, Wilton Medical Associates said, "(Oxford's) restrictions make it nearly impossible to continue to provide high quality health care, much less run a practice."

Among the reasons they cited are Oxford requiring them to send blood work to outside testing labs and that all x-rays be done at an Oxford-contracted facility. In addition, the letter cites low reimbursement fees and pre-certifications for any treatment, which the doctors claim is often used by Oxford to deny recommendations made by doctors.

"This creates enormous lag in treatment time, causing delays in prescribing the most appropriate medicine to effect ... recovery," said the letter.

"These restrictions and limitations are demeaning to us as physicians, are not in your best interest as a patient, and create

an atmosphere of frustration and antagonism between doctor, patient and insurer," it said. "We can no longer deal with the arbitrary and capricious decisions made by Oxford's management."

Oxford Health Plans, based in Trumbull, has approximately 101,000 members in Connecticut, which include commercial and Medicare patients. A merger with United Healthcare

was announced on April 26.

On Thursday, May 13, Maria Gordon Shydlo, director of public relations for Oxford, said she could not comment on any of the specific complaints levied against the company by Wilton Medical Associates and other medical offices in town, but said Oxford was reaching out to Wilton Medical Associates "in hopes of keeping them in the net-

work."

Wilton Medical Associates will continue to treat patients covered by Oxford, but the patients must now pay for treatment and submit claims as "out-of-network," for which the patient generally receives low rates of reimbursement.

Dr. Gade said in an interview that Wilton Medical Associates began accepting Oxford patients

about 8 to 10 years ago, but the relationship got worse over the years.

"It was very difficult to get hold of any representatives at all to address complaints. We had to jump through a lot of hoops. There was always very little response on their part," she said.

Dr. Gade said "600-plus

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patients” would be affected.

“One of the things that keeps us in business is being paid for medical care and tests so we can pay our employees and run the practice. We were sometimes reimbursed pennies for tests we performed, it makes running a practice impossible,” she said.

According to the Wilton Business Directory published by the Wilton Library Association, there are approximately 15 medical offices in Wilton. That number does not include optometrists, dentists or chiropractors, which are usually not covered by HMOs such as Oxford.

Not worth the cost

Liz Lewis, office manager at the Wilton Medical Walk-In Clinic on Danbury Road, said the clinic does not accept Oxford either, for many of the same reasons cited by Wilton Medical Associates.

“They’re not a good payer to doctors, they won’t accept doctors’ recommendations, and sometimes they won’t admit a patient to the hospital because the doctor isn’t associated with

them,” she said.

“I remember when I used to work at the hospital that they were just awful to deal with,” said Ms. Lewis.

Joe Cropf, practice manager for Wilton Family Eye Care on Danbury Road, said his office stopped accepting Oxford claims more than two years ago because of the impact the HMO was having on the business.

“While we were seeing Oxford patients for *medical* reasons, and being paid substandardly for that care, they were referring our *well* patients to sub-standard eye care centers for routine vision exams instead of coming to us,” he said.

“Basically, the fees they pay don’t cover the cost of the service. And, in addition, they have their own set of rules on what gets covered and what’s not, which is different from Medicare and other medical insurance and it’s hard to determine what those rules are,” he said.

“Oxford has its own way of doing things and I think that’s what frustrates most providers,” said Mr. Cropf.

He did explain, however, that routine vision care — which is the bulk of Wilton Family Eye Care’s business — is not usually

covered by medical insurance.

A ‘nightmare’

Gail Nielsen, a licensed physical therapist and owner of Wilton Physical Therapy since 1986, had no kind words to say about Oxford. Her practice is one of few in Wilton that still accepts Oxford patients.

“Oxford is a nightmare,” she said.

“We have presented material to the attorney general and the insurance commissioner’s office as patient advocates. One of the main problems we’ve had is that we can evaluate the person on the first visit, but we’re not allowed to treat them on the first visit,” said Ms. Nielsen.

“We find patients progress more quickly if they are seen in a more timely fashion. They (Oxford) have up to 48 business hours in which to respond to approve treatments. So if we see someone on a Friday afternoon, we can’t schedule them until the

next Wednesday. This includes post-surgical patients, too,” she said.

Ms. Nielsen said Oxford recently has given Wilton Physical Therapy verbal approvals to treat patients, but there has been problems with fax confirmations.

“They are approving, normally, 50% of the visits the physician and therapist has recommended. The approved visits are averaging about six visits,” she said.

“We have not been able to figure out what their criteria are upon which they make their decisions. It’s not according to the American Physical Therapy Association, which publishes the ‘Guide to Physical Therapy Practice.’ All insurance companies have access to this manual,” said Ms. Nielsen.

Ms. Nielsen said there’s a tremendous amount of cost to provide care for Oxford patients.

“They have reduced their reimbursement to below the cost of providing the service. But we don’t differentiate in the quality of care we provide or the (insurance) company they have. We continue to see people one-on-one for 45 minutes with a licensed physical therapist,” she said.

Ms. Nielsen also said her practice runs into problems when requesting extensions for the number of visits a patient is allowed.

“If we ask for six visits, they will give us between one and three. And if that has to go to appeals, that means the patient either has to privately pay or they have a lengthy wait in which their record is reviewed through the appeal process,” she said.

The pending merger between Oxford Health and United Healthcare gives Ms. Nielsen some hope for relief.

“We’re staying with Oxford

because United Healthcare has been an excellent company to begin with. Both for patient benefits and for provider reimbursement,” she said.

Debora Spano, Northeast Communications Director for United Healthcare, said, however, the merger between Oxford and United Healthcare will likely take between six months to a year before it’s approved by state and federal regulators.

“It’s all waiting on approval from regulators. There are several states involved. These things take a long time,” she said.

Ms. Spano seemed surprised to hear about the problems health care providers in Wilton were experiencing with Oxford, but she couldn’t comment on how or if that would change if and when the merger is approved.

“We aren’t even allowed to look at each other’s plans, or anything else, until the merger is approved,” she said.