



# COLLEGE of AMERICAN PATHOLOGISTS

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October 25, 2023

*Sent via email*

Leah Timmerman  
Staff Vice President, Provider Solutions  
Anthem Blue Cross and Blue Shield

Dear Ms. Timmerman:

The College of American Pathologists (CAP) has been hearing increased concern from our members across the country about Anthem's reliance on exclusive contracts and requirements around laboratory referrals. As you know, the CAP is committed to addressing escalating health care costs, but hindering access to high-quality pathology services by limiting or steering referrals can negatively affect a patient's diagnosis, treatment, and outcome. Especially for the most vulnerable populations, including patients in Medicare Advantage and Medicaid programs, adding unnecessary burdens to receiving laboratory testing can interrupt continuity of care, exacerbate issues around social determinates of health, and translate to increased costs down the road. **Thus, the CAP is requesting a more comprehensive explanation of Anthem's referral requirements and an opportunity to discuss our concerns further.**

As the world's largest organization of board-certified pathologists and leading provider of laboratory accreditation and proficiency testing programs, the CAP serves patients, pathologists, and the public by fostering and advocating excellence in the practice of pathology and laboratory medicine worldwide. The influence of pathology services on clinical decision-making is extensive and the infrastructure and foundation for appropriate care it provides are critical to the treatment of patients. Outpatient pathology and laboratory services – including those provided at both freestanding and hospital locations – are critically important to ensure coordinated patient care.

For example, we have heard from members that their health system is required by Anthem to send select patient samples to outside laboratories, despite the fact that the health system maintains a high-quality laboratory with full accreditation and compliance with the Clinical Laboratory Improvement Amendments (CLIA). This requirement unnecessarily increases turnaround time and inconvenience, negatively impacting patient care. Further, these health systems must implement additional interfaces to ensure maintenance of intact medical records and bidirectional flow of information.

Other members report being unable to perform certain laboratory testing even where there is need for laboratory testing that requires immediate attention, instead having to direct the patients elsewhere. Additionally, we have been hearing from members about the impact the Anthem requirements have on residency training. Pathology residents, dermatology residents, and gastroenterology residents, for example, rely on the ability to have access to cases, which Anthem is directing elsewhere. Removal of diagnostic



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material from the treating institution seriously undermines the important continued deliberation and discourse by the pathologists and clinicians involved in a patient's care and impairs continuing education of medical staff and trainees through those activities.

The impact Anthem requirements have on patient care are most concerning. Unnecessary referral can also adversely affect appropriate response to acute developments in a patient's care, and possibly cause significant delay in diagnosis. For patients who live further away from the health system/hospital, returning to receive care after the results have been returned may be difficult and more likely to result in delayed care and poorer health outcomes. Additionally, some conditions may require rapid evaluation and treatment – not always possible when sending samples to outside laboratories – in order to prevent serious, even life-threatening complications. Requiring patient samples to be sent outside the health system also decreases quality of care by preventing participation of the pathologist who is part of the multidisciplinary team. Imposing these requirements on Medicare Advantage and Medicaid patients in particular is likely to accentuate already existing disparities in care.

Again, the CAP understands the need to address health care costs, but we strongly oppose any actions that disrupt coordination, add patient burdens, or compromise quality care. This is a particular concern for the most vulnerable patient populations, including those who are impacted by Anthem's referral requirements. Further, as mentioned above, misdirecting services that are critical to coordination/quality of care, can lead to increased health care disparities and added costs downstream. The importance in ensuring patients' continued access to coordinated and high-quality care cannot be understated.

Elizabeth Fassbender, JD, Assistant Director of Economic and Regulatory Affairs for the CAP will contact you to arrange further discussions. She can be reached at [efassbe@cap.org](mailto:efassbe@cap.org) or 608-469-8975.

Thank you for your attention to this important issue.

Sincerely,



MD, FCAP

A. Joe Saad, MD, FCAP, CPE  
Chair, Council on Government and Professional Affairs