



Barbara L. Horn, O.D.
AOA President

December 19, 2019

Karen S. Lynch, President
Aetna
151 Farmington Avenue
Hartford, CT 06156

Delivered via email to: LynchKS@aetna.com

Dear Aetna President Karen S. Lynch:

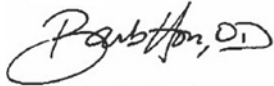
The AOA is concerned about improper and potentially illegal actions recently undertaken by Aetna.

First, we have learned that Aetna has begun routinely downcoding claims for patient services without reviewing the doctor records for these visits, for certain doctors nationwide. This appears to be in violation of the Health Insurance Portability and Accountability Act (HIPAA), a variety of state laws related to fair, accurate, and timely processing of claims, and Aetna's contracts with patients and physicians alike. Specifically, Aetna is arbitrarily replacing the code submitted by the doctor that describes the service provided, with a different code, representing a lower level of service. It is inappropriate for any insurer to make these decisions using an algorithm based on the doctor rather than a review of the patient's charts. HIPAA requires Aetna to follow the standard coding language for such health insurance transactions. The standard coding language is shorthand for the information contained in the medical record, so changing the code without consulting the documentation is improper. Unfortunately, Aetna has a negative track record with making decisions about patient care without reviewing the patient's medical records and basing decisions on unjustified assumptions regarding the doctor providing care to the patient. This bad faith negatively impacts patients. We ask you to end this unjustified practice immediately.

Second, we believe Aetna is violating Section 2706 of the US Public Health Service Act, which prohibits discrimination in coverage and network participation. In addition to discriminating against patients in coverage (and reimbursement), based on the doctor providing the care as described above, Aetna is discriminating against the rights of patients to obtain covered care from doctors of optometry. Specifically, Aetna is not contracting directly with doctors of optometry. Instead, Aetna requires doctors of optometry to contract with EyeMed. This discriminatory practice forces doctors of optometry to meet the credentialing requirements of EyeMed, rather than the conditions of participation for Aetna, even though Aetna credentials other health care professionals who provide the same services. Many optometrists who do not fit EyeMed's model of retail optometry or pose competition to EyeMed's commercial interests are being denied access to the Aetna medical network. Meanwhile, medical doctors contract directly with Aetna, allowing ophthalmologists to freely credential with the medical plan without being subject to EyeMed's self-serving network restrictions.

We ask you to end these discriminatory practices immediately and establish a line of communication with our Third Party Center Executive Committee. Contact Rodney Peele, Esq., Director of AOA's Third Party Center, at rpeele@aoa.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Barbara L. Horn, O.D.", written in a cursive style.

Barbara L. Horn, O.D.
AOA President