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From: drstehle@therapeuticum.org [<mailto:drstehle@therapeuticum.org>]

Sent: Monday, May 03, 2010 7:28 PM

To: EBSA, E-OHPSCA - EBSA

Subject: Comment in support of RIN 1210-AB30

May 03, 2010

I am writing to support the interim final rule under the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (RIN 1210-AB30).

Since January 2010 insurance companies seem to have tightened their requirements for mental health treatments again. Our clinic offers intensive outpatient programs for chronic mental health conditions or those that have not responded to basic interventions. Our approach is a self-care approach that teaches patients to be proactive in the treatment of their condition, understand their limitations and create meaningful and sustainable lives for themselves. Our programs address chronic pain conditions, treatment resistive anxiety, stress, and depressive disorders, and Autism Spectrum Disorders in children and adults.

Over the years we have been able to make "Single Case Agreements" with HMO's and PPOs due to the specialty nature of our programs. However since January of 2010 insurance reviewers routinely tell us that the conditions are not severe enough to warrant IOP (intensive outpatient program) even though our patient's conditions fit their own criteria for admission to IOP. It is as if insurance carries deny services until a lawyer gets involved, and even then we have to go through appeal after appeal. Frequently, the insurance carrier changes their tune right before the appeal goes to the department of insurance. However, many patients give up before that time, because they need help and need it now.

I support the strong rule that would forbid insurance companies from charging higher copayments, deductibles, and other out-of-pocket expenses for mental health treatment than they would for other physical health care. Thank you for ensuring that mental health care and physical health care coverage are included in a single deductible.

Sincerely

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