

# PUBLIC SUBMISSION

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**Docket:** IRS-2009-0008

Request for Information for Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008

**Comment On:** IRS-2009-0008-0001

Request for Information Regarding the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008

**Document:** IRS-2009-0008-0039

Comment on FR Doc # E9-09629

## Submitter Information

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## General Comment

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Comments regarding Regulatory Guidance USCG-2007-27022  
page 19157, II B specific areas 1 and 4

I am a mental health practitioner who provides EEG biofeedback (neurofeedback) treatment to individuals with Attention Deficit Hyperactivity Disorder (ADHD) and Mood Disorders. EEG biofeedback has been empirically validated and widely recognized as an effective non-medication, non-invasive, treatment for ADHD, PTSD, brain depression, anxiety, and many other conditions. There are over 50 studies evaluating the effectiveness of EEG biofeedback in the treatment of ADHD, substance abuse disorders and autism. . A recent review of this literature concluded "EEG biofeedback meets the American Academy of Child and Adolescent Psychiatry criteria for" Clinical Guidelines "for treatment of ADHD." This means that EEG biofeedback meets the same criteria as medications.

Unfortunately for the people who suffer from these disorders, EEG biofeedback services have been denied coverage by Georgia Medicaid, Aetna, United Behavioral Health, Blue Cross, Cigna, Amerigroup and others. This prevents in many cases access to an effective and valid treatment for mental health problems.

The reasons given by the insurance companies for this denial of coverage fall into two categories:

- company policy does not cover EEG biofeedback for mental health problems
- lack of sufficient evidence for the efficacy of EEG biofeedback.

Apparently, insurance companies are using evidence-based criteria for authorizing coverage for EEG biofeedback treatments that are far more restrictive than the criteria they use for medical/surgical services. There are many routine medical and surgical procedures which have far fewer controlled studies about their efficacy than does EEG biofeedback. These medical and surgical procedures are generally not limited because of concerns about how many controlled studies have been performed about them.

I believe that parity regulations are needed that should require insurance companies to pay for the same range and scope of services for mental health treatments as they do for medical/surgical services. It is blatantly biased that a medical plan be more restrictive in their managed care criteria for mental health services. This violates both the intent and letter of the parity statute and we hope that regulations will correct this bias.

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