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Insurance companies, in order to assure parity, should not reject claims by specific provider specialty or per specific diagnosis, based on capricious internal decisions by insurance company and which is not stated in any specific policy.

For example, although addiction services are included in the scope of practice for OB/gyns for pregnant and non-pregnant women, insurers in my state of Massachusetts have a practice of rejecting claims submitted by Ob/gyns, even those with addiction medicine training and credentials, in an addiction setting. They do not put this in writing or offer any specific reasoning behind the decision. This limits offering integrated addiction services, particularly to women of reproductive age who have unmet needs in terms of integrating their addiction care with their reproductive needs, such as contraceptive management, preconception counseling and planning, family planning, etc.

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