

**According to MHPAEA, *nutrition counseling for treatment of eating disorders is a required mental health benefit.***

**In May 2023, leadership of The International Federation of Eating Disorder Dietitians asked members to share their experiences.**

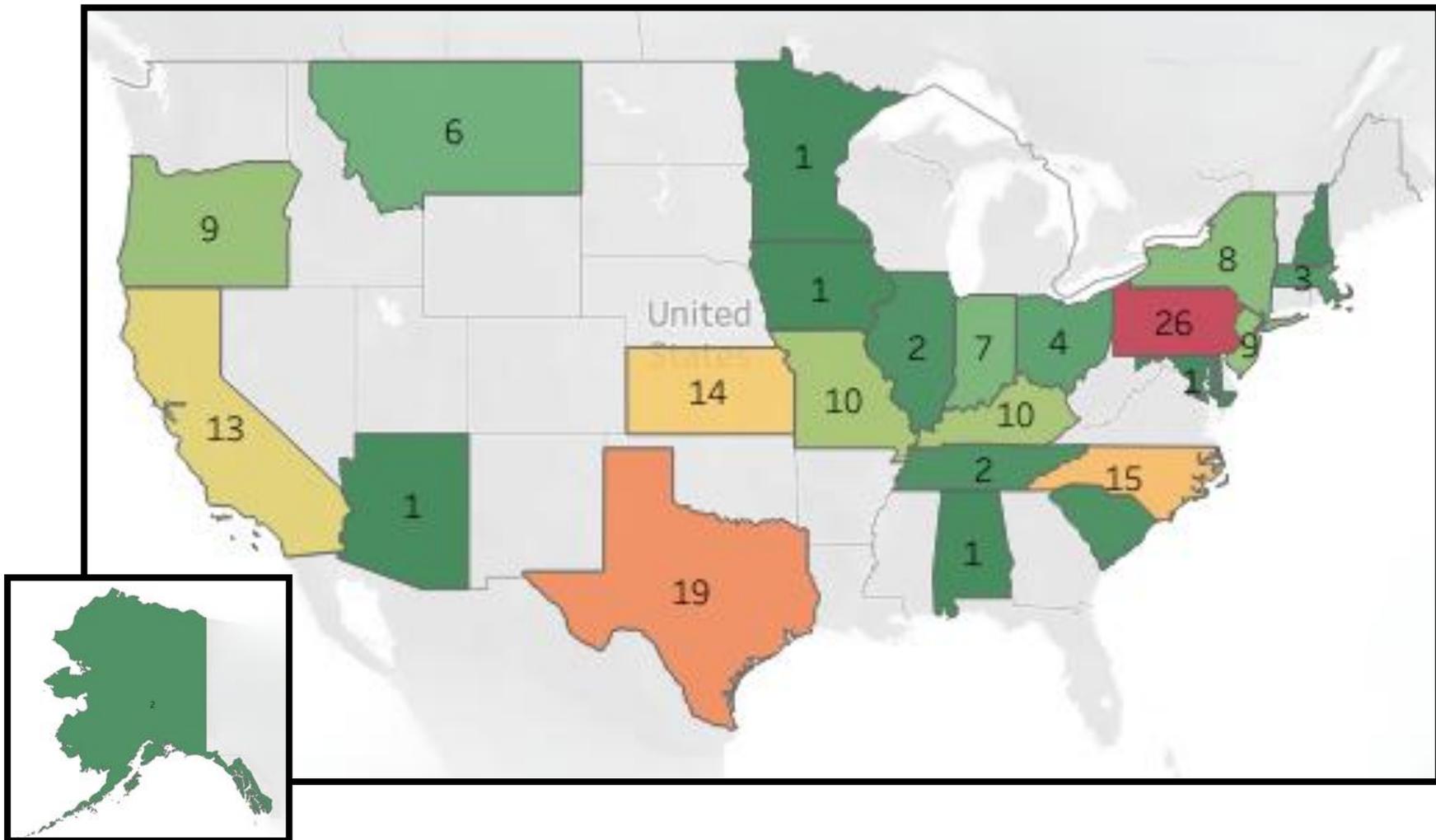
**Within 72 hours, 173 patient cases.**

**IFEDD's Access to Care Project was created to review these cases, help these 173 patients understand their rights, and teach them how to appeal improper denials if needed.**

**Statistically, United Health Group accounted for >1/4 of all reported cases, so in August 2023, IFEDD's director began a prolonged attempt to help UHG solve the problem internally. 11 months later, nothing has been solved.**

**The following slides show important points gathered from these initiatives.**

**The reported rejections of coverage for ED MNT were widespread throughout the country. This chart shows the nationwide distribution of the 173 cases in our study.**



Source: Investigating MHPAEA Violations: Insurance Denials of Eating Disorder MNT.

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# This chart shows the 56 different insurance companies among the 173 cases in our study.

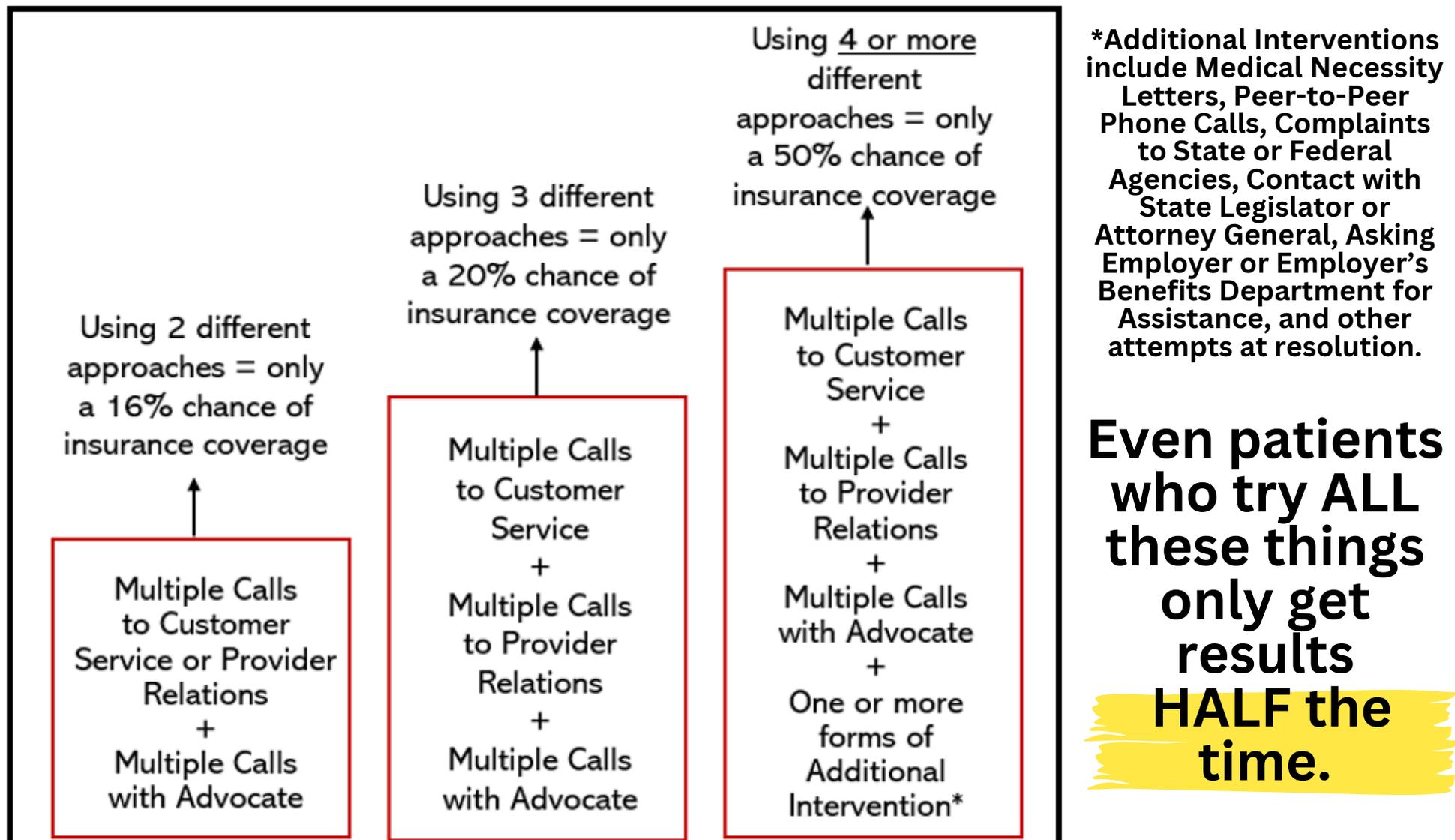
Aetna	BCBS of Massachusetts	Keystone Health Plan East
Aetna CVS	BCBS of Michigan	Magellan
Aetna Group	BCBS of Montana	MedCost
Aetna Jefferson Health	BCBS of North Carolina	Medicaid
Alligiance	BCBS of South Carolina	Medical Mutual of Ohio
Anthem	BCBS of Texas	Medical Mutual of Omaha
Baylor Scott & White	Blue Shield of California	Meritain Aetna
BCBS Federal Retiree	CBA Blue	MODA Insurance
BCBS	Central Pennsylvania Teamster Ur	Pacific Source
BCBS of Arizona	Cigna	Performance Health
BCBS of California	Diocese of Cleveland	Providence Insurance
BCBS of Florida	Florida Blue	Regence
BCBS of Georgia	Geisinger Healthplan	Regence BCBS
BCBS of Highmark	Health New England	Tricare
BCBS of Illinois	HealthLink	UHC Nexus
BCBS of Independence	Horizon NJ Direct	UMR
BCBS of Indiana	Independence	UMR Minnesota Life Insurance Company
BCBS of Kansas	Intercommunity Health	United Health Care (UHC)
BCBS of Kentucky	Kaiser Permanente	

Source: Investigating MHPAEA Violations: Insurance Denials of Eating Disorder MNT.

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The process of appealing MHPAEA violations is circuitous, time consuming & burdensome on patients.

This chart shows that success rates are dismal.

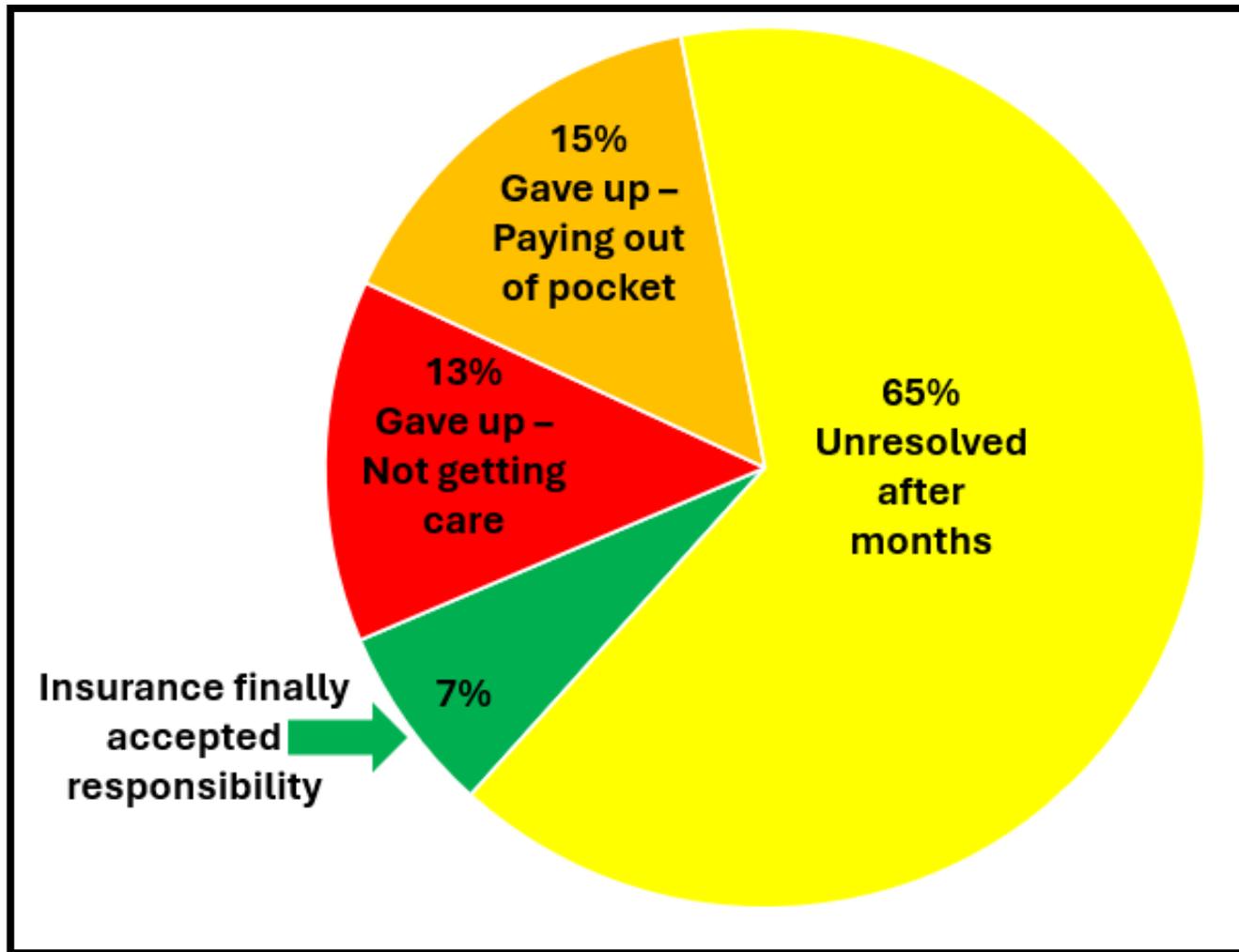


Source: Investigating MHPAEA Violations: Insurance Denials of Eating Disorder MNT.

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**MHPAEA violations of ED MNT are so burdensome on patients' time and finances that many give up.**

**This chart shows that after months of fighting, only 7% of violations were reversed by insurance.**



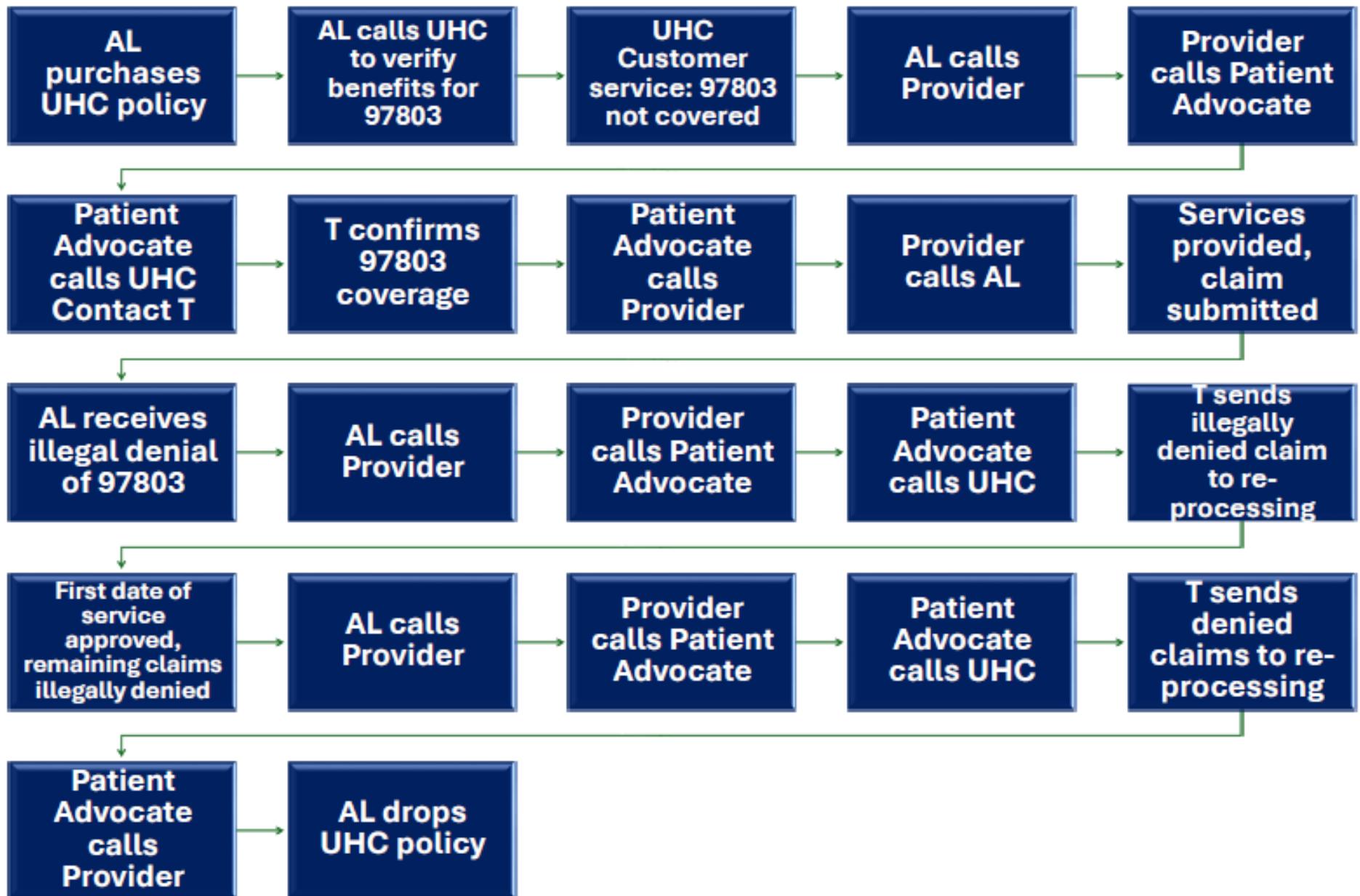
**28% of patients gave up on fighting insurance and either stopped getting care or paid out of pocket.**

**Others are still fighting with insurance >1 year later.**

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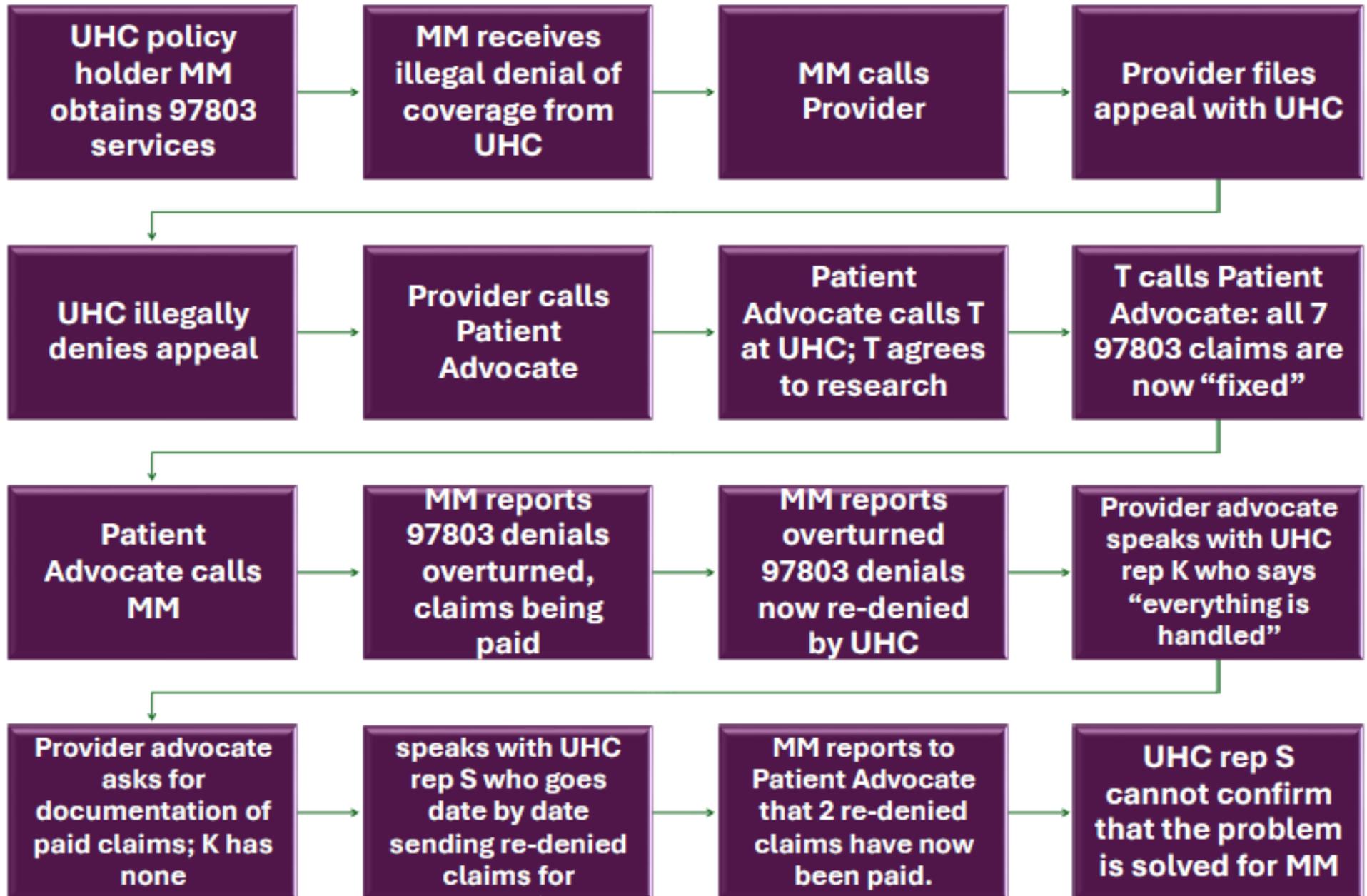
# This chart shows one patient's experience attempting to get MHPAEA-mandated coverage for ED MNT.



Source: IFEDD Access to Care Program communication with United Health Group Regulatory Affairs Department.

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# This chart shows another patient's attempts to get MHPAEA-mandated coverage for ED MNT.



Source: IFEDD Access to Care Program communication with United Health Group Regulatory Affairs Department.

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**MHPAEA violations of ED MNT are so burdensome on providers' time and finances that many stop accepting insurance as payment, further limiting patient options and access to needed care.**

**The attached documents titled "Documentation of UHC Contact" Parts 1 and 2 record 11 months of phone and email communication by a former provider attempting to solve the problem with United Health Group on behalf of multiple patients and providers.**

**Serving in the role of unpaid consultant, the opportunity cost/loss of income for this provider  
IS IN EXCESS OF \$250,000  
AND THE PROBLEM IS STILL NOT SOLVED.**

**This is outrageous. If an educated advocate can't solve the problem, a patient or provider trying to make calls during the workday will never be able to.**

Source: IFEDD Access to Care Program communication with United Health Group Regulatory Affairs Department.

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**Part of the problem is that insurance company staff is not educated about MHPAEA or eating disorders.**

**Many patients were told by customer service that their ED MNT was a covered benefit, only to be denied coverage after the service, because claims reviewers (whether human or computer programs) were incorrect.**

**Of the small percentage of improper denials that were eventually reversed, it was only after intensive intervention by patients, families, providers and advocates, wasting time, causing emotional distress, and delaying medically necessary and legally required eating disorder treatment.**

**It should not be the patient or provider's burden to teach the insurance company or employees their legal responsibility.**

**Patients are left with no choice because insurance companies don't have dedicated staff or a dedicated department to report or dispute a MHPAEA violation.**

**Without a dedicated phone number to contact a knowledgeable employee, patients/families and providers are bounced around from department to department without ever getting resolution.**

**Our requests for the MHPAEA Clarification:**

**1. Require insurance providers to have one phone number patients can call to request resolution of any MHPAEA violation. Staffers should be educated about MHPAEA, including MNT for eating disorders, and empowered to overturn improper denials immediately.**

**2. Address the non-standard usage and improper denials of “nutrition counseling.” Specifically, use and require insurance companies to use “Medical Nutrition Therapy (MNT)” instead of “nutrition counseling” and alert customer-facing and claims review staff that the required covered benefit for eating disorders is “Medical Nutrition Therapy,” abbreviated “MNT,” provided by a Registered Dietitian Nutritionist, using CPT codes 97802-97804.**

**3. Require that Registered Dietitian Nutritionists be dually credentialed by both the Medical and Behavioral sides of the insurance company because eating disorder specialist dietitians are medical providers treating mental health conditions. Such dual credentialing is standard practice for other medical providers and should encompass dietitians as well.**

**Thank you for all you are doing to ensure that individuals with eating disorders receive care.**