

Sir or Madam,

I am writing to you regarding a crisis that is affecting the health of your members as a result of your company's policy to limit the number of providers within your network. The policy of limiting your network is a travesty to your members as well as to providers. I understand that you are relying on statistics in order to justify this policy, however, statistics and the reality of available providers are worlds away from each other.

As you know statistics present a very narrow snapshot of any given situation. There are always many variables that are not always able to be accounted for in statistical data. For example, the clinicians in any network tend to be participating in many networks thus their availability is not limited to any one insurance network. Thus, the number of clinicians in network does not provide a clear picture of the number of available time slots nor does it accurately distinguish between full time and part time hours. Some clinicians have retired, moved out of the area, are not accepting new patients, are transitioning to an all cash business etc. Also, with the climate of our insurance driven industry, clinicians are not going to inform networks when they no longer have availability for new patients or have made changes to their hours. The fear is that in doing so they may no longer receive referrals in the future. In summary, the statistics do not accurately reflect the reality.

I have spoken to numerous consumers who have reported that they have contacted the customer service mental health hotline to obtain a referral list only to contact the recommended clinicians and be informed that they do not have availability during the hours that they are available or they are no longer accepting new patients. Frequently consumers will just give up in frustration. I am actually seeing patients that are driving over an hour for their appointments due to lack of available clinicians in their area. We have been told to recommend that members contact customer service again if they are not able to find a provider, but customers are reporting contacting customer services several times with similar results. Some consumers report beginning treatment with providers that are over booked and are reporting difficulty in obtaining consistent appointment availability.

Another facet of this crisis is that many providers are choosing to no longer accept insurance reimbursement and some are creating in-house package deals to patients. Some primary care physicians are calling this concierge services. As the Affordable Care Act becomes fully enacted, there will be many more consumers seeking treatment and many analysts predict a gross shortage of providers.

If you or your loved ones ever needed psychotherapeutic services, in your and many geographical areas, you or your loved one may find it difficult to find a provider accepting your insurance. Of course there is the self pay option but many people cannot afford this option. I certainly hope that you and your family never have to be in the position that thousands of your members are facing. I also hope that you never have to witness another human being or their children needing help and being unable to obtain this help. Many people needing mental health care do not have the energy or stamina required to advocate for accessible treatment.

Unfortunately these cost cutting measures are leading to individuals foregoing treatment, as a result increased inpatient stays and sicker patients. It is also causing quality providers to leave the health and mental health field leading to bigger deficits of mental health providers.

I am asking you to consider the points that I have made as I am reporting these facts from the "trenches". The reality is that even your customer service specialists are struggling to find providers for your members. They are expressing their frustration over the number of providers

providers for your members. They are expressing their frustration over the number of providers that are unable to accommodate members in need of treatment.

Please ask yourself would you want to struggle to find quality services for yourself or your loved ones? Would you want to have limited choice or have to obtain services from huge community mental health centers where privacy and personalized care is more difficult to attain or would you rather obtain treatment from a private practice where you are treated like a unique individual? Would you be torn if you had to choose between treatment for your child or forego other needs in order to pay for care out of network? How would you feel if your child or family member were a victim of a senseless act of violence that may have been prevented if mental health treatment were easily accessible? You may believe that these things wouldn't happen to you but we are all at risk. This is what we are facing.

Best Regards,

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