

My 2024 Summer Internship:

# IFEDD ACCESS TO CARE PROJECT

By: Hope Bigbee



# ABOUT ME

Undergraduate Nutrition Student - December 2024

DPD Student - Didactic Program in Dietetics

Attending Texas State - MS in Human Nutrition





My Mentor:

# JESSICA SETNICK MS, RD, CEDS-S

Registered Dietitian, Eating Disorder Specialist, Speaker, Speaking Coach, Researcher,  
Director of the International Federation of Eating Disorder Dietitians (IFEDD)



# HOW DID I JOIN THE ACCESS TO CARE PROJECT?

- ★ September 2023 - Matched in the RD Mentorship Program
- ★ Spring 2024 - Asked Jessica to be my mentor
- ★ May - August 2024 - Internship
- ★ November 2024 - Article Submitted



# TERMS

**MNT** = Medical Nutrition Therapy

“Nutrition based treatment provided by a registered dietitian”

**ED** = eating disorder

**RD** = Registered Dietitian

Dietitian is a legally protected term, RDs must have an MS, completed a dietetic internship, and have passed the certification exam

**MHPAEA** = the Mental Health Parity and Addiction Equity Act

# BACKGROUND

MHPAEA (2008) is supposed to ensure “parity in coverage or coverage that is no more restrictive than for mental health/substance abuse benefits as for medical/surgical benefits.” - meaning there cannot be additional restrictions or requirements to qualify for coverage just because care is for a mental health condition as opposed to a physical health condition.

Example: Restrictions on the number of visits “cannot be more restrictive than the predominant financial requirements and treatment limitations that apply to substantially all medical/surgical benefits in a classification”.

- Covering 26 RD visits for obesity but only 10 for ED - in violation of MHPAEA

However, it is widely known by ED care professionals that coverage for MNT for ED patients is routinely improperly and illegally denied.

Whether intentional or not - these denials are **ILLEGAL**, patients are not receiving coverage for care they are legally entitled to



# BACKGROUND

When improper denials happen it can be incredibly laborious and time consuming to appeal them and restore coverage.

- For patients and their families: ED diagnosis is already difficult and emotional, already have the job of securing other types of care (therapy, doctor's visits, psychiatrist, etc.), normal lives, working, may not have time to make multiple calls, be put on hold for extended periods, or perform other interventions
- For dietitians: are going uncompensated or have delayed compensation, spending additional unpaid hours working on appeals, may be forced to consider not accepting insurance for payment -> shrinking care networks, even more difficult for patients to get care
- Overall leads to discontinuing care or paying out of pocket
  - Discontinuing care: non-recovery, relapse, hospitalization, ER visits, death
  - Paying out of pocket: financial burden for patients/family, medical debt

# WHAT IS THE ACCESS TO CARE PROJECT?

Goal is to capture the scope and scale of improper denial of insurance coverage for MNT for ED patients as well as identify significant features or trends.

- Where is this happening? Only in certain states?
- Who is this happening to? What are their characteristics?
- Which insurance companies are these denials coming from?
- What are patients/dietitians doing to combat this problem? Interventions?

Pilot Study - get an idea of what patients and providers are experiencing so we can design a more in-depth and comprehensive survey to define this problem further



# HOW DID THE PROJECT START?

- Improper denial of insurance coverage for MNT is commonly experienced by ED dietitians but current knowledge of the scope and depth of this problem is largely anecdotal
- The Access to Care project was started by Jessica Setnick and Domna Antoniadis, a lawyer who fought her own insurance company in court over denial of coverage for her eating disorder nutrition care.
- Domna offered her legal expertise pro bono to IFEDD's dietitians to help them and their patients with their own disputes/appeals but she and Jessica wanted to address the problem on a larger scale.



# WORK PRIOR TO INTERNSHIP

- ★ Literature review

- ★ Created data set

1. Read through ~170 individual patient or dietitian submitted cases

2. Input into Survey Monkey

# LITERATURE REVIEW

Total of 10 articles relating to the subject were identified through PubMed from 1994-2022  
Search terms included:

- "health insurance" AND "eating disorders"
- "health insurance" AND "mental health"
- "health insurance" AND "nutrition counseling"
- "insurance barriers" AND "eating disorders"
- "mental health parity" AND "insurance", etc.

Search revealed that this area has been relatively unstudied and no attempt has previously been made to capture this problem in the modern day and post 2008



# DATA SET CREATION

A message was sent out via the IFEDD listserv, requesting examples of cases where there was difficulty obtaining insurance coverage. 172 cases were collected within 72 hours from IFEDD members or patients. Initially 3 questions were asked:

1. Name of the insurance company and insurance plan
2. Name of the employer and the state they're located in
3. A description of the problem they've been having with insurance (narrative)

Each case was given a number and stripped of identifying information

# DATA SET CREATION

- Contact (patient, dietitian, parent, other)
- State
- Plan Type A (HMO, PPO, Medicare, etc.)
- Plan Type B (Fully-funded, self-funded, marketplace, etc.)
- Company Name
- Plan Name
- Denied Service
- Reason for Denial
- Process
- Interventions (Customer Service, Provider Relations, Written Appeal, etc.)
- Result
- Overturn Reason (only if eventually covered)

**LUELLA  
FU**

**DATA ANALYST  
SAN FRANCISCO  
STATE UNIVERSITY**

**ME**

**SCIENCE  
INFLUENCER**

**GABRIELLE  
SALAMANCA**

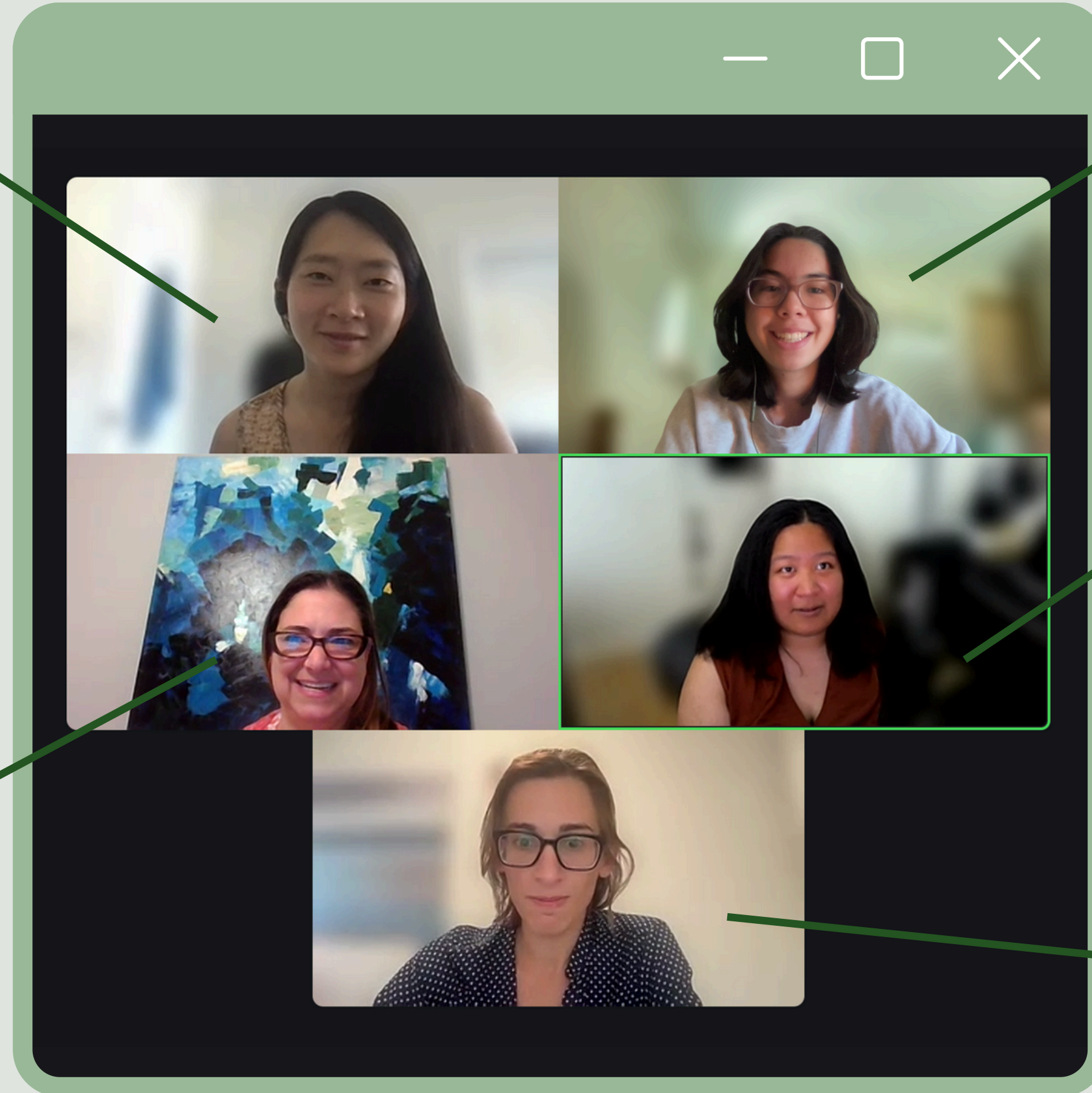
**DATA ANALYST  
SAN FRANCISCO  
STATE UNIVERSITY**

**JESSICA  
SETNICK**

**IFEDD DIRECTOR**

**DOMNA  
ANTONIADIS**

**ADVOCACY LAWYER**





# DATA ANALYSIS

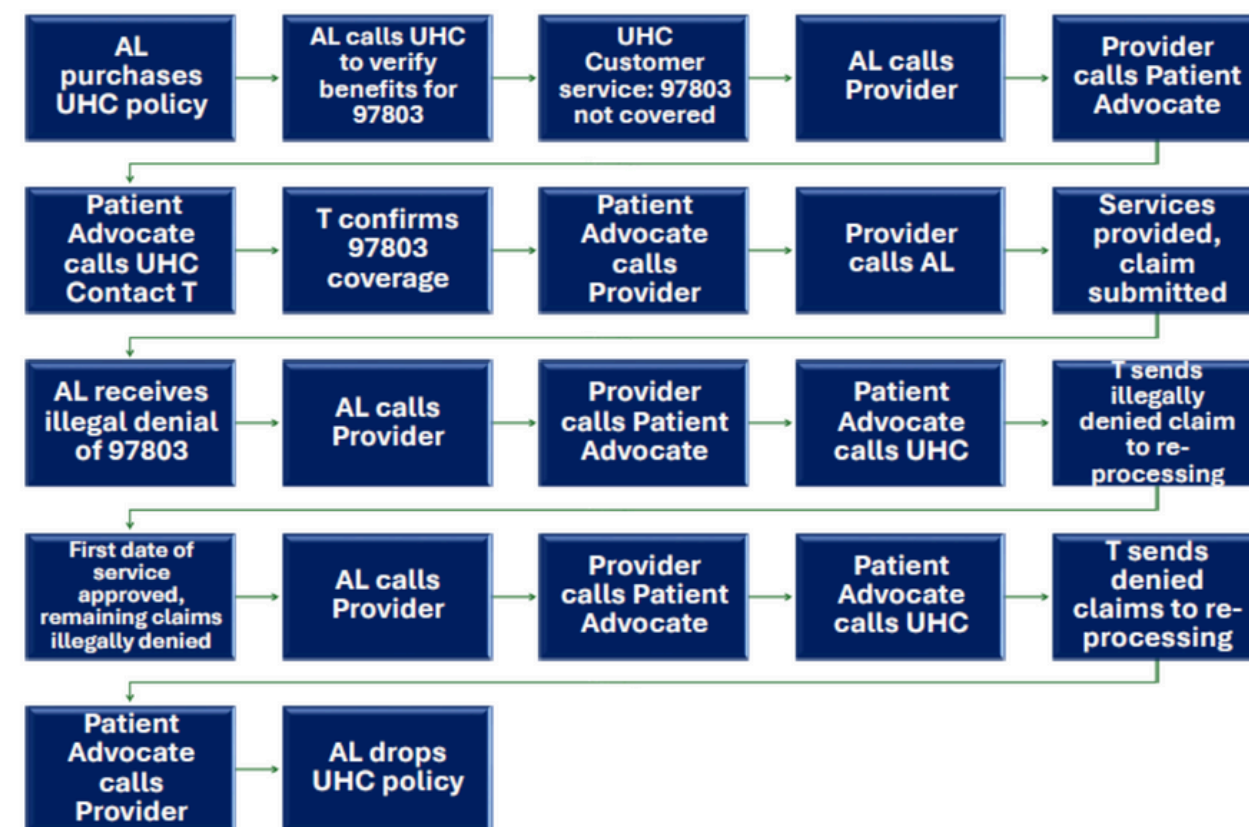
- Tableau Public - creates data visualizations
- Google Sheets

Used to perform simple calculations, and identify trends

# PRESENTING TO REGULATORS

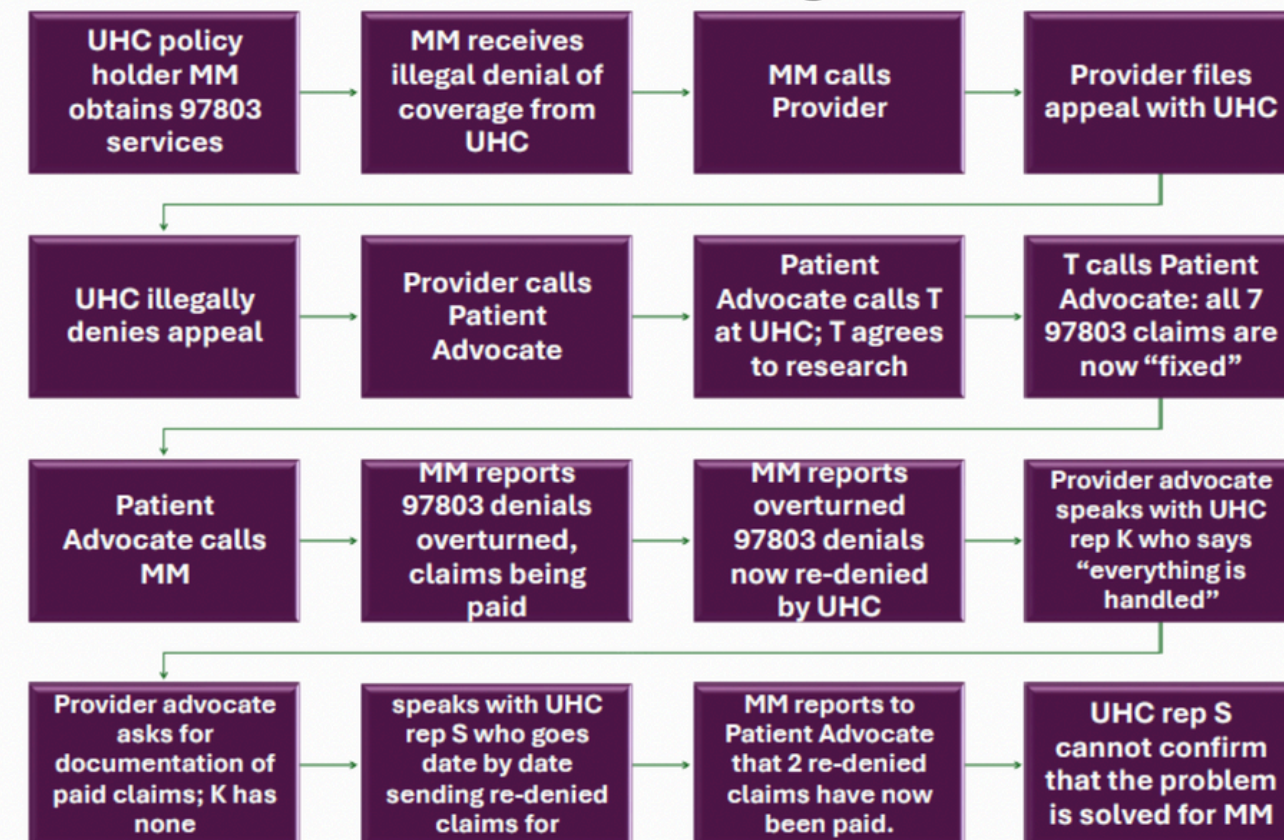
Presented our preliminary findings to insurance regulators and other related parties from the US government.

**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.**

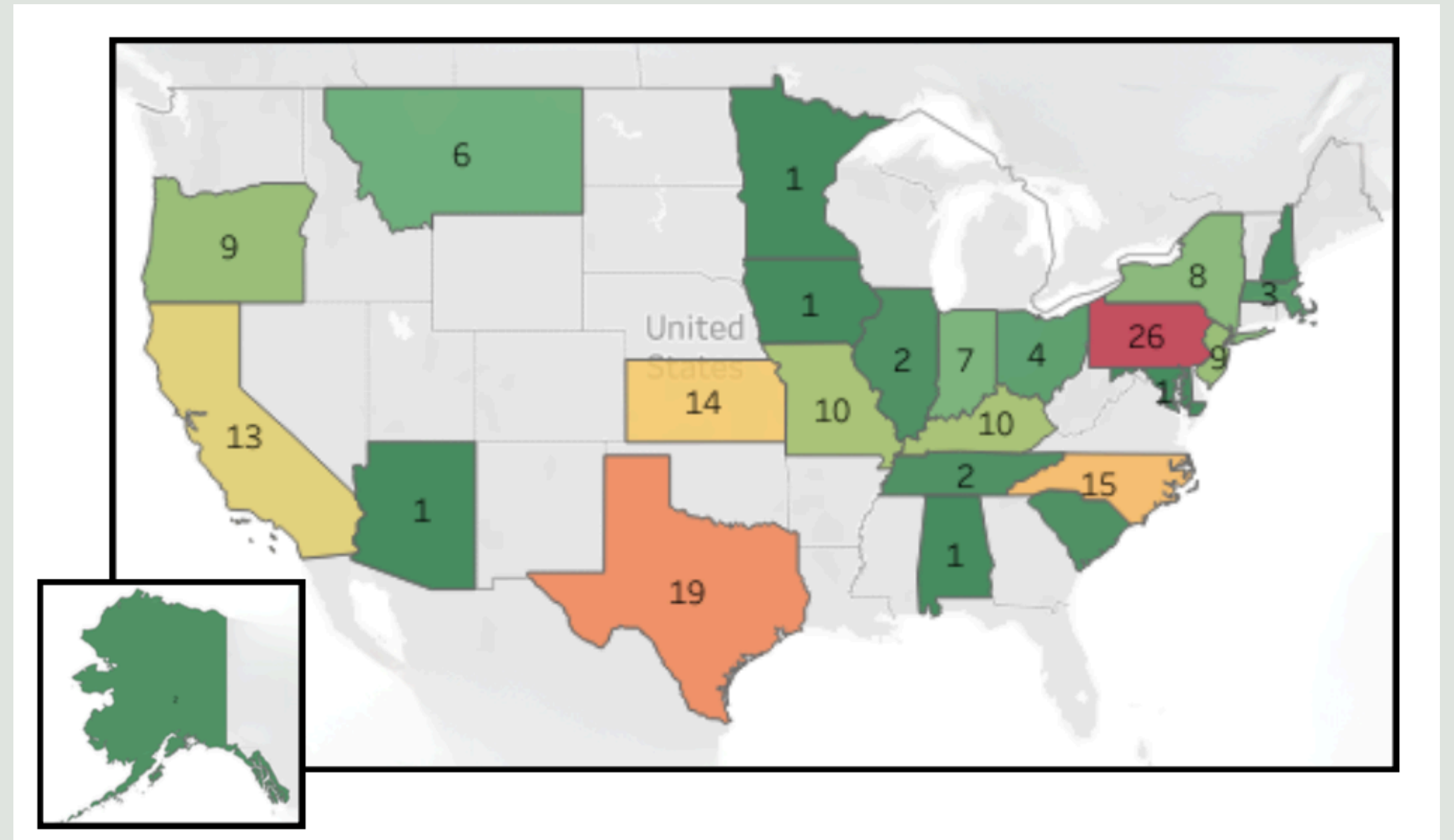


Source: IFEDD Access to Care Program communication with United Health Group Regulatory Affairs Department.  
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# FINDINGS - I

Violations are widespread throughout the country - not limited to specific states or areas of the country

We received cases from 26/50 states as well as D.C.





# FINDINGS - II

Illegal denial of care is an industry wide problem, systemic - not limited to a certain company or group

Total of 56 companies named

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
Allegiance	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	

# FINDINGS - III

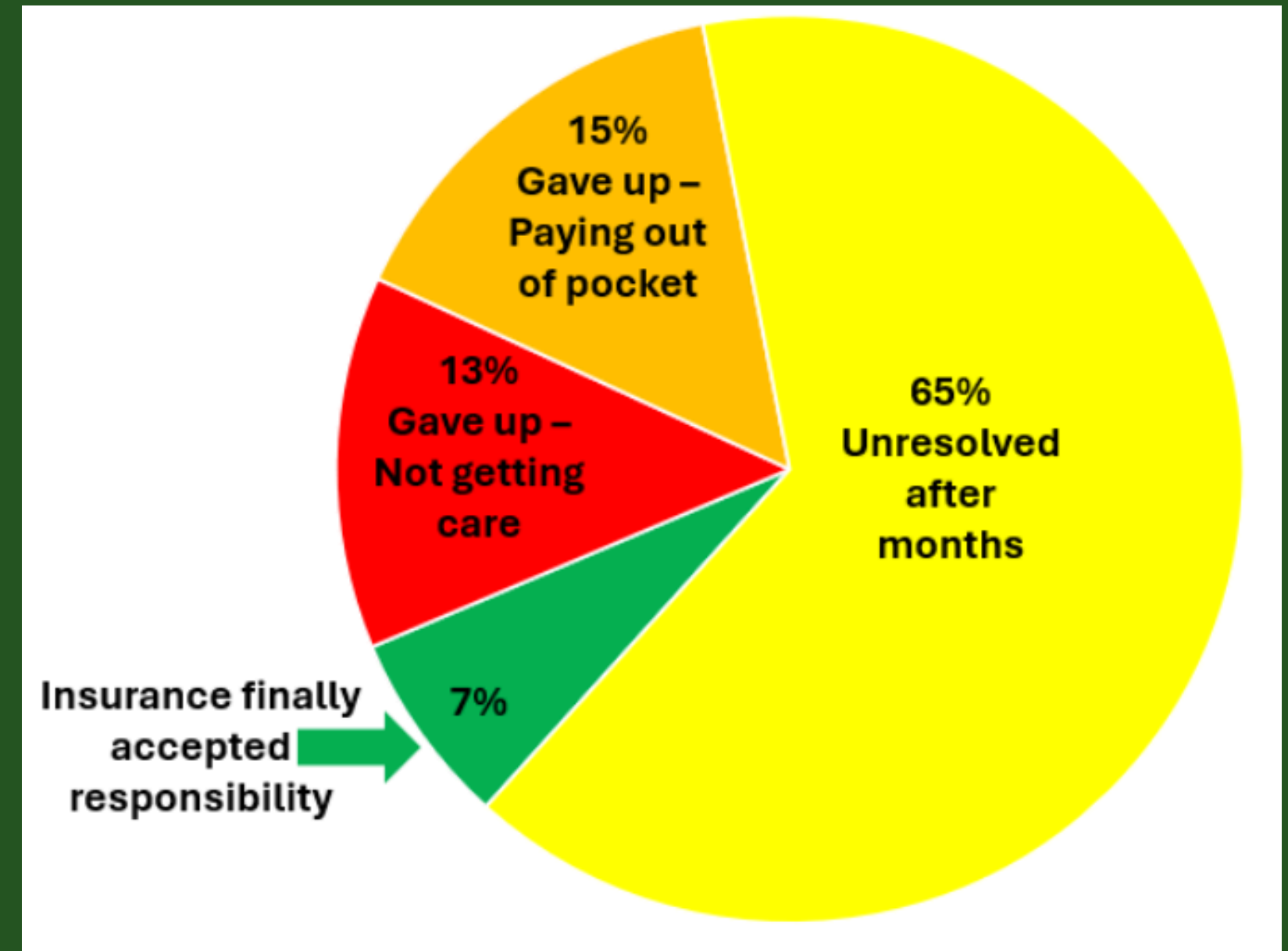
## 7 Types of Interventions

1. Calls to customer service phone lines by the patient, family, or provider
2. Calls to provider relations phone lines by provider, staff, or contracted billing agency
3. Reconsideration request (a less formal step before pursuing a full appeal)
4. Letters of Medical Necessity (dietitian may be asked to provide this to explain why the patient needs this service)
5. Peer-to-peer review meetings (discussions between providers and the insurance company)
6. Complaints filed with regulatory agencies such as the Federal Department of Labor or State Attorneys General
7. Hearings

# FINDINGS - IV

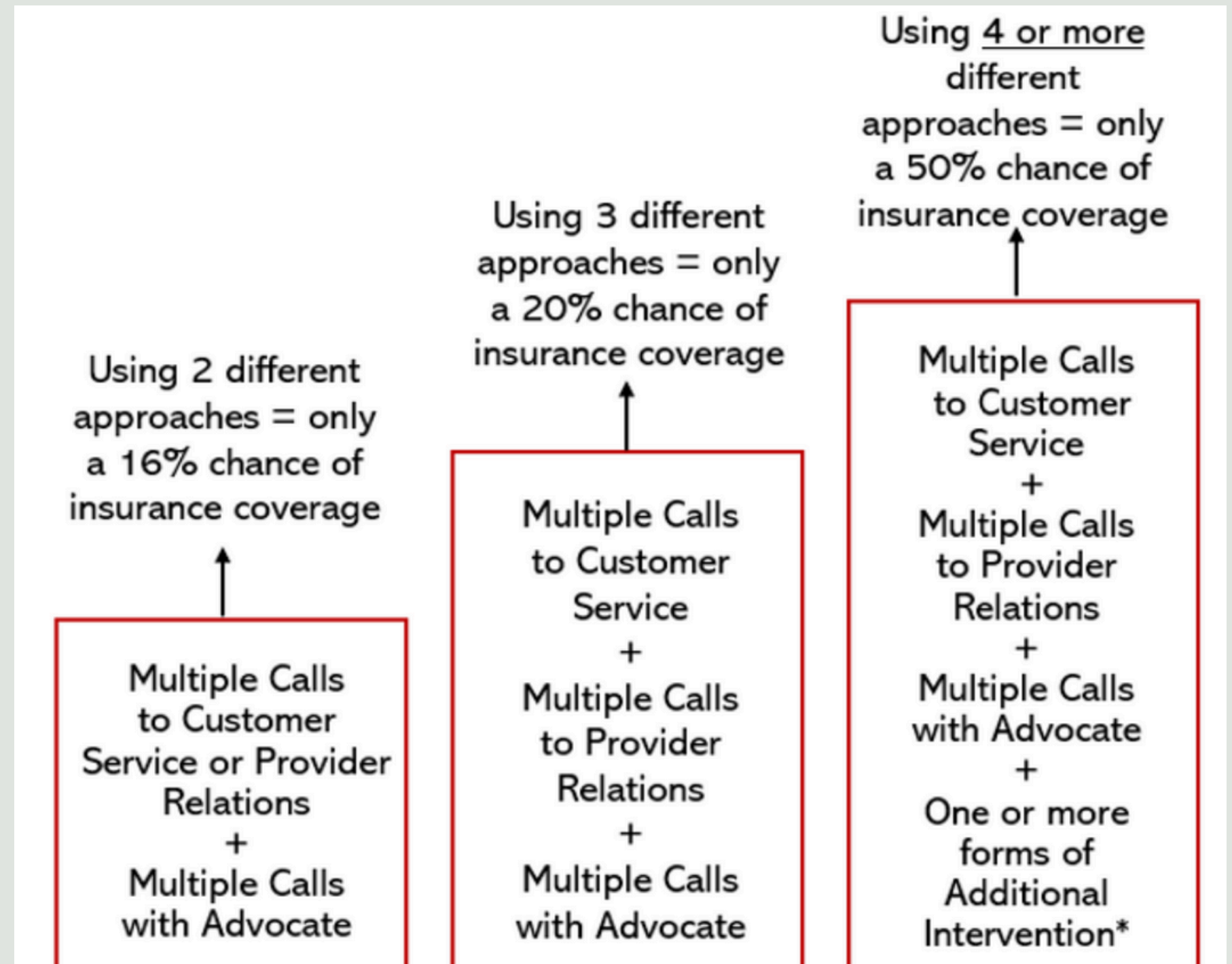
## 4 Primary Outcomes

- 1 Insurance reversed the improper denials and accepted responsibility for coverage
- 2 Insurance refused to reverse the improper denials and patient or family paid for services personally
- 3 Insurance refused to reverse the improper denials and patient stopped receiving medically necessary care
- 4 Outcome unknown/unresolved



# FINDINGS - V

Based on our data, the likelihood of getting an improper denial reversed was at most 50%, and after 4 or more interventions the chances decrease significantly

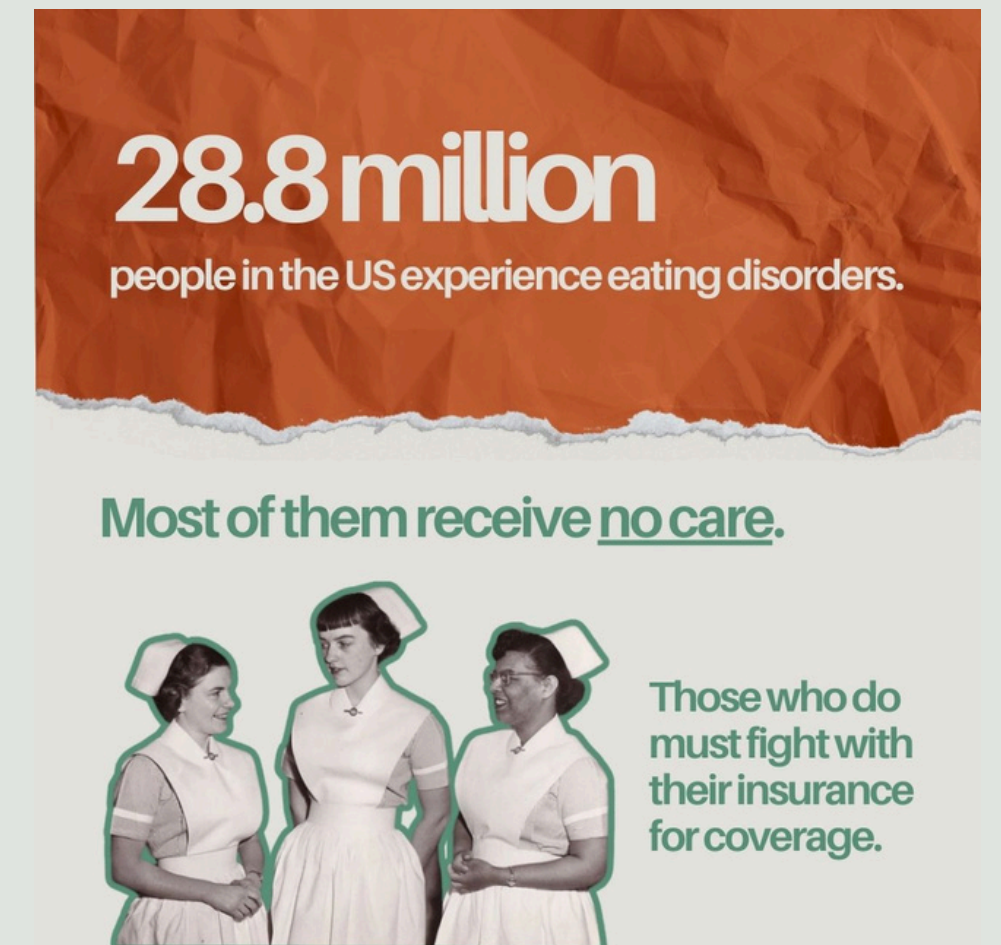




# DISCUSSION

Such systemic illegal denial of care is unacceptable

Denial of coverage patients are legally entitled to delays receiving care which leads to the condition worsening and undue physical and mental suffering, and in the worst of cases hospitalization and death. Waiting until patients need higher levels of care is more expensive and burdensome on the American health care system



# DISCUSSION

We did not record how much time was spent by either patients or practitioners trying to appeal denials but it is reasonable to guess that it is insurmountable. (This is something we hope to measure with our next survey)

The longer we wait and the more time that is wasted on this problem the higher the death toll becomes.

# CONCLUSION

Although there is more to study regarding MHPAEA insurance violations for ED nutrition care, enough is known to prompt investigation and enforcement by regulators.

# WHERE ARE WE GOING NOW?

We would like to measure other aspects of these denials as well as their effect on patients and providers:

- How much time on average is being spent appealing these denials?
  - For providers: how much are they not being paid for this time?
- How many times have patients/providers received these denials?
  - If a denial is reversed, does it happen again with the next visit?
- What are the emotional effects for patients and providers? How does this effect their wellbeing
  - Hopelessness, frustration, anger, despair
- What are the effects on the patients condition?
  - When care was denied did this lead to: non-recovery, relapse, ER visit, hospitalization, death (what are the rates of these)
  - How often do providers chose to drop insurance?
- Although we received 172 cases from all across the country, how many would we receive if we left it open for more than 72 hours? - How big is this problem truly?



# REFERENCES

1. Medical nutrition therapy [WWW Document], n.d. . Centers for Disease Control and Prevention. URL <https://www.cdc.gov/diabetes-toolkit/php/reimbursement/medical-nutrition-therapy.html> (accessed 11.13.24).
2. The Mental Health Parity and Addiction Equity Act (MHPAEA) [WWW Document], n.d. . CMS.gov. URL <https://www.cms.gov/marketplace/private-health-insurance/mental-health-parity-addiction-equity> (accessed 11.13.24).
3. IFEDD groups.io group [WWW Document], n.d. . Groups.io. URL <https://groups.io/g/IFEDD> (accessed 11.13.24).
4. Ifedd.org [WWW Document], n.d. . Ifedd.org. URL <https://ifedd.org/> (accessed 11.13.24).
5. Eating disorder statistics: ANAD - National Association of Anorexia Nervosa and associated disorders [WWW Document], 2024. . ANAD National Association of Anorexia Nervosa and Associated Disorders. URL <https://anad.org/eating-disorder-statistic/> (accessed 11.13.24).
6. Red hair: It's in your genes [WWW Document], 2023. . Medcover Genetics. URL <https://medcover-genetics.com/red-hair-its-in-your-genes/#:~:text=Everyone%20is%20aware%20of%20red> (accessed 11.13.24).

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# QUESTIONS?

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