

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-2009-0008-0062](#)

Comment on FR Doc # E9-09629

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General Comment

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

I am a physical therapist who provides biofeedback treatment to individuals with Spinal cord and Traumatic brain injuries. Biofeedback is an empirically validated and widely recognized effective non-medication treatment for these conditions, as well as other conditions. There are several studies evaluating the effectiveness of biofeedback in neuromuscular reeducation.

This service has been denied by Georgia Medicaid, Actna, United Behavioral Health, Blue Cross, Cigna, and Amerigroup.

This is limitation of an effective and validated treatment for a mental health problem. The reasons given by the insurance companies for this denial was there is not yet sufficient evidence for the efficacy biofeedback. As such, they are using evidence-based criteria that are far more restrictive for these services than the criteria which are used for medical/surgical services. There are many routine medical and surgical procedures which have far fewer controlled studies about their efficacy than does biofeedback. These medical and surgical procedures are generally not limited because of concerns about how many controlled studies have been performed about them.

We believe that the parity regulations, based on legal reviews of the parity statute should require that employers and plans pay for the same range and scope of these services as they do for Med Surg benefits and that a plan cannot be more restrictive in their managed care criteria and reviews for MH and SA disorders when compared to Med Surg. Today plans are being more restrictive in how they review evidenced-based Mental Health and Substance Abuse Treatments when compared to Med Surg treatments. This violates both the intent and letter of the parity statute and we hope that the regulations will clarify that this can't continue.