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Request for Information Regarding the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008

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Request for Information Regarding the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008

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General Comment

CMS-4140-NC

I am private practice psychologists in Rome Georgia, and I provide EEG biofeedback treatment to patients with Attention Deficit Hyperactivity Disorder and Mood Disorders. I write to advise you that our EEG biofeedback is an empirically validated and widely recognized effective nonmedication treatment for ADHD, as well as other conditions. There are over 50 studies evaluating the effectiveness of EEG biofeedback in the treatment of ADHD, substance use disorders, and autism. A recent review of this literature concluded "EEG biofeedback meets the American Academy of Child and Adolescent Psychiatry criteria for " Clinical Guidelines "for treatment of ADHD." Thus, EEG biofeedback meets the same criteria as to medication for treating ADHD, and EEG biofeedback "should always be considered as an intervention for this disorder by the clinician".

Unfortunately, EEG biofeedback has been denied by Georgia Medicaid, Aetna, United Behavioral Health, Blue Cross, Cigna, and Amerigroup. They deny their patient pool an effective and validated treatment for a mental health problem. The

reasons given by the insurance companies for this denial fall into two categories: 1) the insurance company does not cover biofeedback or 2) there is not yet sufficient evidence for the efficacy of EEG biofeedback. As such, they demand evidence-based criteria which are far more restrictive for mental health services than is the case for medical/surgical services.

I believe that the Parity bill regulations should require that employers and plans pay for a broad range services for mental health treatment as is the case for medical/surgical procedures. Plans should not be more restrictive in their managed care criteria for mental health disorders than they are for medical/surgical problems since that would be discriminatory. However, current insurance plans are clearly more restrictive in their demands for evidence-based mental health and substance abuse treatments when compared to medical surgical treatments.