

Testimony of Cathy Morelli, Southington, Connecticut

Before the Senate Judiciary Committee

“Justice Denied: Rules Delayed on Auto Safety and Mental Health”

November 7, 2013

I'm here today to talk about the difficult battle I had with my health insurer in my attempt to get my teenage daughter the treatment she needed for her mental illness. I was completely blindsided by my health insurer's constant denials for mental health treatment my daughter so desperately needed. It was a battle I had never previously experienced whenever I sought treatment for medical conditions. Unfortunately, I discovered in a very difficult way that coverage for treatment of a mental illness would not be as easily accessible as treatment for a medical condition.

Early in 2012, my then 13 year old daughter was struggling with an eating disorder and began engaging in self-harming behaviors and suicidal attempts. Her first inpatient hospitalization began on March of 2012 due to a suicide attempt and cutting herself. Within 6 days of this hospitalization our health insurer denied her continued stay in this hospital advising that they felt she could be managed on an outpatient basis and inpatient treatment was not medically necessary. The hospital disagreed with my insurer and filed an expedited appeal but my insurer maintained their denial.

Within a day of being released from that first hospital she again attempted suicide and engaged in serious self-harming behaviors including cutting into her thigh so deeply that sutures were required to close the wound. She spent the next 14 days in the emergency department and during her stay there she began her aggression towards people and spent most of her days in restraints and under heavy sedation. Within 6 hours of being released from this emergency department, she again attempted suicide and was struggling significantly with an eating disorder and spent the next 8 days medically admitted to the hospital on a feeding tube. Once stabilized, she was transferred to VT to yet another psychiatric hospital.

Over the course of 5 months she was in and out of numerous psychiatric hospitals with each stay being prematurely cut short due to my health insurer's refusal to pay for the treatment that every doctor and therapist said she needed.

I had applied for voluntary services through the Department of Children and Families very early on to get help in managing my daughter's mental illness as it was becoming very clear that my health insurer was not going to pay for the treatment she really needed. Every denial was based on my health insurer's contention that inpatient treatment was not medically necessary and that she could be managed on an outpatient basis. DCF provided us with intensive in-home psychiatric services, known as IICAPS, in between hospital admissions. She was also being seen by an outpatient provider.

Despite IICAPS' and her outpatient provider's best efforts, my daughter's illness continued to spiral out of control, but without health insurance to cover the necessary inpatient treatment and the inability to pay out of my own pocket, I had no choice but to rely on outpatient treatment.

Things really escalated in June of 2012 when my daughter brought a knife to school and revealed this along with extensive fresh cuts on her body to staff. She was taken to the hospital and then was admitted to yet another psychiatric hospital. This was a turning point for my daughter because despite my health insurer's denial, this hospital would not release her as she was a danger not only to herself, but to others as well.

While inpatient and under the care of professionals who treat mental illness, my daughter attempted and nearly succeeded at suicide. She was placed on what is called one-to-one supervision meaning staff was within arm's reach of her at all hours of the day and night. I fail to see how my family could have provided this level of care in our own home as our health insurer claimed was possible. I'll read an excerpt from a letter addressed personally to my then 14 year old daughter for her inpatient stay where she attempted and nearly succeeded at ending her life. The letter is dated July 16, 2012. I quote "We cannot approve the request for hospital admission as of July 16, 2012. The hospital gave us information about you. This did not show that hospital care is medically necessary. You have recently been in the psychiatric hospital for about one month due to behavior problems and trying to hurt yourself. You have had these problems for a long time. You had to go into the medical hospital for a few days and now the medical hospital wants you back in the psychiatric program. You had not been getting better in a significant way for at least the last 30 days. There is no plan to do anything different. It does not seem likely that doing the same thing will help you get better. You need treatment that will likely help you get better..." Interestingly, the insurer paid for only one day of the 30 days they spoke about in their letter. They acknowledge she needs treatment but they make it very clear they are not going to pay for it.

Along with DCF, The Office of the Healthcare Advocate became involved in my daughter's case. We applied for Husky Health which is the state funded insurance plan and coverage began at some point during this latest hospital admission. With the help from the state my daughter was finally able to get the long term treatment that was necessary to stabilize her condition and allow her to return home and be managed on an outpatient basis.

With the help of the OHA we began appealing the 13 denials issued by my health insurer in those 5 months. At first, we went through the insurer's two-step internal appeal process but the denials were upheld. We then filed external appeals through the insurance dept. and every single denial ever issued by my health insurer was overturned. It never had to get to the level it did considering the Mental Health Parity Laws in place. With a lack of regulations these health insurers will not stop their discriminatory practices towards the treatment of mental illness.

Cathy Morelli
Southington, CT