## **Mental Health**

## **Liaison Group**

November 16, 1999

Saul Feldman, D.P.A. Chairman and CEO United Behavioral Health 425 Market Street, 27<sup>th</sup> Floor San Francisco, CA 94105

Dear Dr. Feldman:

The undersigned members of the Mental Health Liaison Group (MHLG) – a coalition of national organizations representing consumers, family members, advocates, professionals and providers-- were deeply disappointed with United Behavioral Health decision to maintain prior authorization practices for mental health care, but eliminating these same procedures for medical/surgical services. United's policy is without scientific justification and – even worse – it serves to reinforce the discrimination and social stigma suffered by all children with serious emotional or behavioral disturbances and adults with mental illnesses.

Indeed, your remarks in the media that attempt to justify the corporation's decision can only be described as startling. In particular, we are alarmed by your statements in the *Washington Post* (pg. E 10, Nov. 12, 1999) indicating that medical/surgical services have "more evidence-based practice," and that mental health services have "not been evaluated in terms of efficacy." Furthermore, on the same day, you are quoted in the Associated Press as saying that mental health care "holds a lot more intangibles."

Any objective examination of the available scientific evidence would demonstrate that – at the very least – these statements are incorrect. For example, although it has not yet been formally released, advance summaries of the upcoming U.S. Surgeon General's Report on Mental Health contain the following two statements:

- "Diagnoses of mental disorders made using specific criteria are as reliable as those for general medical disorders."
- "A range of *effective* treatments exist for nearly *all* disorders." (emphasis added)

The report goes on to cite efficacy data which are well known in the mental

health field. As illustration, clinical depression – perhaps the most prevalent mental illness in the United States today – can be successfully treated 70% of the time with psychopharmacologic and psychotherapeutic treatments; these often are most effective when combined. Similarly, the treatment efficacy data for bipolar disorder regularly indicate success rates of 70% to 80%. Even 60% of people with schizophrenia – the most disabling mental illness – can successfully recover with the proper interventions.

Therefore, it is our sincere hope that your statements do not represent official United Behavioral Health policy statements which, in turn, form the basis for your firm's utilization review system.

In conclusion, MHLG formally requests that United Behavioral Health reexamine its utilization review policy with an eye toward treating medical/surgical services and mental health care in the same manner. We would be happy to provide you with whatever scientific data is necessary to clarify any uncertainties that you may have. In fact, given the gravity of the situation, a selected group of representatives from the undersigned organizations would like to meet with you at the first available opportunity in order to resolve this matter.

Sincerely,

Alfonso Guida Co-Chair of Mental Health Liaison Group

American Academy of Child and Adolescent Psychiatry

American Association for Marriage and Family Therapy

American Association for Psychosocial Rehabilitation

American Board of Examiners in Clinical Social Work

American Family Foundation

American Federation of State, County and Municipal Employees

American Group Psychotherapy Association

American Occupational Therapy Association

American Psychiatric Association

American Psychiatric Nurses Association

Association for the Advancement of Psychology

Association for Ambulatory Behavioral Healthcare

American Counseling Association

American Psychological Association

Anxiety Disorders Association of America

Children and Adults With Attention-Deficit/Hyperactivity Disorder

Clinical Social Work Federation

Corporation for the Advancement of Psychiatry

Depressive and Manic Depressive Association

International Association for Psychosocial Rehabilitation Services

National Association of Psychiatric Health Systems

National Association of School Psychologists

National Association of Social Workers

National Association of Psychiatric Treatment Centers for Children

National Council for Community Behavioral Healthcare

National Depressive and Manic-Depressive Association

National Foundation for Depressive Illness

National Mental Health Association

Tourette Syndrome Association