

PSYCHOTHERAPY and HEALTH INSURANCE COVERAGE:  
WHAT YOU DON'T KNOW CAN HURT YOU

Some clients want to know if they can use their health insurance to pay a portion of the cost of their life or relationship coaching. Coaching is not a medical service, and therefore is not a covered expense for health insurance.

The information provided below is for your education, and gives you the little-known caveats of the use of health insurance for *psychotherapy*, which I no longer provide. I believe that knowing this information is vital to your well-being on many levels, and share it with you here.

Psychotherapy or counseling, no matter the particular kind or "flavor" that is provided, whether that be Clinical Psychology, Counseling, Social Work, or Marriage and Family Therapy, are all based on a broken-ness paradigm. I think of it in general, as the paradigm of pathology. **Psychotherapists diagnose and treat mental disorders**, based on the medically-oriented "therapist bible", known as the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*. This is a psychiatric reference and diagnostic guide, intended to categorize and "medicalize" mental and emotional problems into a medical framework.

As part of this medicalization, a living, holistic human being is reduced to parts that are broken and that need fixing, much like a broken carburetor on a car. Much like conventional medical care, the wholeness of the person and her general well-being within the broader context of her life, is ignored in this medicalized view of psychotherapy.

Related to psychotherapy's medicalized view, *health insurance can only be accessed for payment when one or more people receiving psychotherapy are diagnosed with one of the diagnostic codes in the DSM*. These classifications and diagnoses are controversial and open to disagreement, even among medical doctors and psychotherapists. These diagnoses tend to pathologize many normal responses to life experiences, and are in many cases biased against certain groups, such as women, and ethnic groups, since they are based in general on statistics gathered from studying white men, or prison or mental patients in in-patient settings. Also, the majority of individuals on the development committees are white men.

Receiving certain diagnoses from the DSM, can be very damaging to the person receiving the diagnosis, in several ways. People have experienced adverse employment decisions, or life or health insurance decisions being made about them, due to a DSM diagnosis.

Even of more concern, DSM diagnoses tend to carry the weight of assigning identity or a state of being to the person receiving them, which can be extremely damaging to the person's sense of self, and her belief in her potential for growth and change.

If you file an insurance claim and ask that either your psychotherapist be paid directly or that you be reimbursed by your insurance company for some portion of the costs of your treatment, then you are giving your insurance carrier the right to inquire about your treatment. Your psychotherapist may be asked by clerical employees of your insurance company for verbal and/or written details about your treatment, including diagnosis, treatment plan, methods of treatment used, etc. If the psychotherapist does not answer to their satisfaction, you may be denied benefits.

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Managed care companies tend to engage in these practices every few sessions. If managed care insurance personnel are not satisfied with the reports they receive, the psychotherapist may be asked to discuss your treatment in even more detail. The psychotherapist may be directed, for example, to turn over all notes that have been made about the entire contents of any or all of your sessions.

You then, would be faced with a further decision about instructing your psychotherapist to comply, or deal with the termination of your insurance benefit for therapy.

Preparing all of these reports, etc. incur additional financial costs to the client. Your fee would likely increase substantially to cover these costs.

Increasingly, insurance companies are mandating the kind of therapy, methods of treatment, number of sessions, and diagnoses for which they will reimburse, thus taking the ownership for treatment away from you, the client.

Once information is released by your psychotherapist to your insurance company, psychotherapy treatment information is out of the control of the therapist, and may be submitted to the Medical Information Bureau, (MIB). This is a large, national, electronic databank, which doctors, insurance companies and even employers may access. As mentioned above, this may make it more difficult to secure other health or life insurance, and in some cases, may be used by employers to make adverse personnel decisions about you.

I have a fundamentally differing view about the nature of the process of healing, change and growth, than the one the medicalized psychotherapy profession ascribes to, as I discuss on my websites and elsewhere. Mainstream western medicine tends to be reductionistic and mechanical, seeking to divide the person into parts and fix the parts without recognition of the holism, and synergistic nature of the individual and families. In contrast, my view is that the process of healing, change and growth at heart is spiritual and educational in nature, and most successful when undertaken in harmony with the holistic and synergistic nature of individuals and families.

For these reasons and more, I discontinued the practice of psychotherapy, and now provide professional life and relationship coaching, and Spiritual Energetic Healing™, both in harmony with the spiritual and educational nature of change, and the whole Human Being whose infinite potential is in process of growth and expansion.