From: Jenn Dowdy

To: EBSA MHPAEA Request for Comments

**Subject:** Parity - mental health

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I'm writing to comment on how difficult insurance reimbursements have gotten and why nearly all skilled psychotherapists I know no longer take insurance.

Clinicians aren't able to live off the reimbursement rates insurance companies have historically provided. Nor are we paid for the administrative time it takes to be on the phone begging insurance companies for payment dozens of hours per month.

All licensed clinicians I know, especially those of us who live in high cost of living areas, only take clients who are willing to pay out of pocket. This limits the amount of clients we can take on; however, with the current mental health crisis, many therapists, even those not on insurance panels, have a waitlist.

Psychotherapists are in school 6-7 years to attain their required Masters degree. We work poverty wages, if we are paid at all, the entire time we're in school, as well as 2-4 years after we graduate because we still have to attain our full licensure post graduation. Many therapists never make it through to be fully licensed because they cannot afford to live in poverty while working with acute patients.

Psychotherapists must maintain continuing education and pay for their own clinical supervision. If we're in private practice, we must also cover the costs of running a business that includes paying for our own medical insurance.

Dealing with insurance companies and their low reimbursement rates for clinical psychotherapists who are oftentimes on the front lines has become a mere joke in the mental health field. We're fed up with a society that continues to put "the greater good of society" above our own personal financial stability by continuing to reimburse at poverty rates. Meanwhile, all of us have dozens of people we have to turn away each month due to this injustice.

The shortage of mental health providers is glaring, demand for services is at an all-time high, and many therapists are leaving the field due to financial pressure and debt. It's hard to argue that the low pay isn't contributing to this situation. And it's a hard sell to pay other medical providers at higher rates while mental health workers are leaving this field at high velocity due to low reimbursement rates, and other oppressive systemic issues.

It would be misguided to not raise the rates for psychotherapists, especially given the mental health crisis we're in. The only way through this crisis is to value the work of mental health workers who are qualified to steer us through this mental health crisis.

Warm Regards, Jenn Dowdy

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