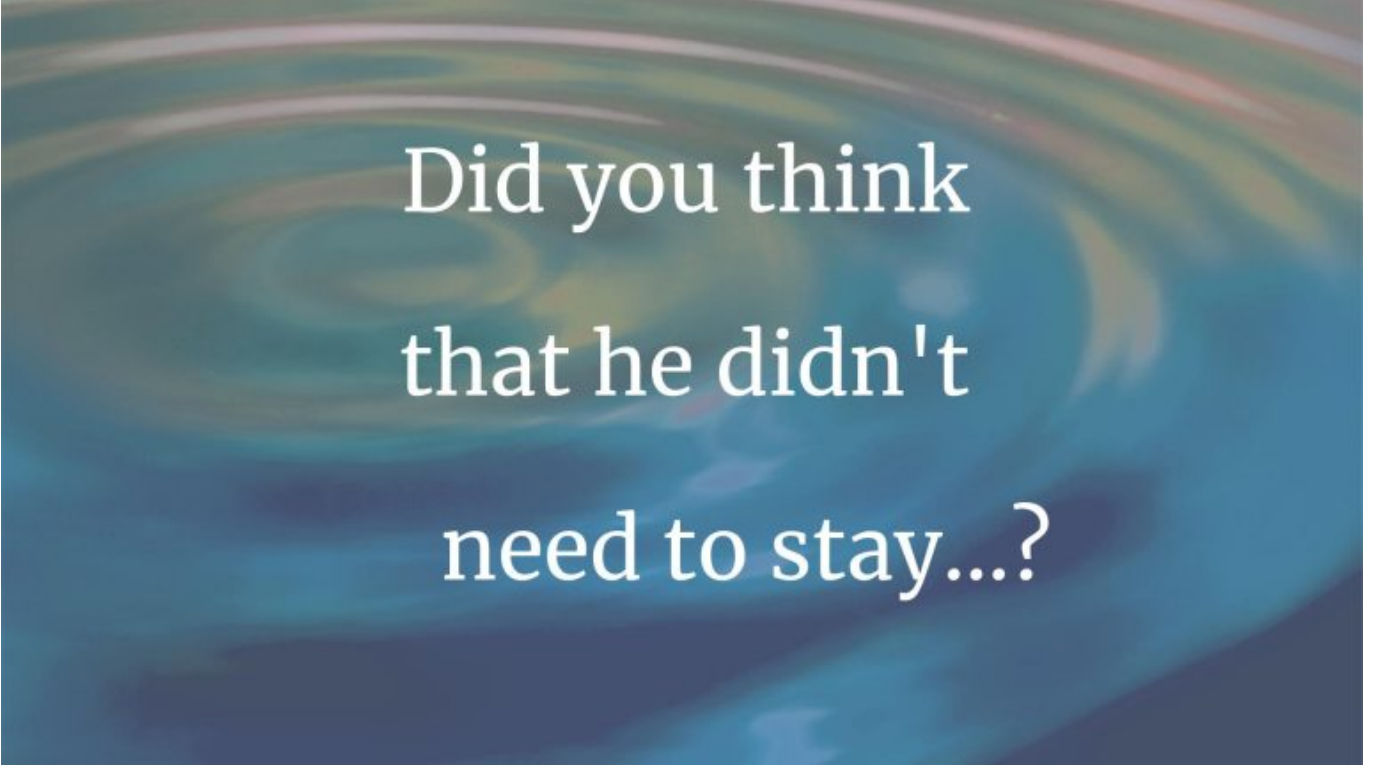


Letter to the Insurance Company Psychiatrist

Category: Stories

written by Miel Sloan | July 7, 2023



Did you think
that he didn't
need to stay...?

Dear Dr. Anonymous:

Are you a Phil, Michelle or Darrell? Two years ago, you booted my seventeen-year-old son out of treatment, signing your denial letter "MD Psychiatrist."

I understand that you were hired to qualify, or disqualify, patients based on a cost-benefit analysis. Your letter suggested that my son's condition could be "managed at a lower level of care."

The letter's repeated use of "may" underlined the fact that you'd never met my son. The human being he is remained hidden behind a curtain of anonymity.

Allow me to open the curtain.

My son's name, Iluka ("ee-LUKE-a"), is Australian for "by the sea." Though he grew up in the American heartland, when he visits the coasts he snorkels through schools of fish as if he were one of them, his skin shimmering like the diamonds he dreamed of finding at age four.

In preschool, he hunted for hours every day for treasures to add to the diorama island he'd built in the bathtub. He used Play-Doh for land, twigs for tree trunks, leaves for palm fronds and sweet-gum tree balls for coconuts. Visitors received a tour of his "island museum," a rapid-fire recital of details about the creatures inhabiting it. For months he added to

that diorama, and we bathed in the other tub. He had no diagnosis then. Or for another four years.

If he suffered during the first eight years of his life, it was eclipsed by his creativity. Self-taught in drawing, in turning a sketch into a pattern and in transforming a pattern into a dress or shirt, he learned by trial and error, starting at three years old and graduating to online tutorials by middle school.

His interest in fashion started early. At seven, he read about the *Titanic*, then, with book open, studying ballgowns, he cut up socks and sewed them into mock-up dresses with buttons, sequins and fake gems.

"I'm figuring out how I can disguise myself as a woman," he said, "and get on those lifeboats first."

In reality, he struggles to keep himself afloat—but he tosses a life ring to others as if it's second nature. In middle school, he befriended a girl the other kids ostracized. When the high-school art teacher yelled at a student with a learning disability, Iluka helped the boy. But he never asked his peers for help with math, or for a shoulder to cry on.

During middle school, his psychiatrist successfully weaned him off medication; he was thriving academically, and he enjoyed time with friends. He graduated from eighth grade, over 6 feet tall and headed to an honors high school.

I never imagined how hormones, stress and a pandemic could derail him.

By tenth grade, completing homework, reading, and leaving the house had become monumental, often impossible, tasks—even when he went back on medication. He picked at his skin, his weight dropped to 128 pounds, and he passed many days under his bedcovers, silent. When he did speak, he screamed about trying to find one reason to delay suicide. His psychiatrist, therapists and insurance provider considered his suicidal ideation and 15.8 BMI life-threatening: They agreed that he needed residential treatment.

His therapist recommended Rogers Behavioral Health, an adolescent residential OCD treatment center in Wisconsin. A five-hour drive and a five-hour intake interview later, the nurse said, "You have to say goodbye now. No family in the rooms." She loaded Iluka's suitcase, pillow and sketchpads onto a cart. Usually too cool for hugs, he held me tightly, our shirts wet with each other's tears.

Every night he called me bawling, begging to come home. I promised that after this treatment the disorder would no longer control his life. After these calls, I'd curl up on the floor, hugging my giant dog and weeping into her back.

Ten days later, Iluka's tears stopped. He began connecting with other residents. His team focused first on eliminating his excessively long bathing rituals, a success that remains two years later. He gained weight. He opened up to his team.

Dr. Anonymous, did you think these improvements indicated that he didn't need to stay? Did the insurance company's criteria take into account how easily a patient can slip backwards if suddenly ejected? Or that patients with severe OCD have *multiple* obsessions and compulsions to resolve before becoming functional?

Iluka's psychiatrist at Rogers pointed to a complicated diagnosis: severe OCD with multiple subsets, ADHD, generalized anxiety disorder and depression. When the psychiatrist met with you for the final appeal, he was still in the process of adjusting Iluka's medications.

I didn't worry about denials; I had called the insurance company to check that my son could stay as long as needed. The woman on the phone said, "Generally, if we approve the first thirty days, we approve whatever the doctor requests."

I assume that, like me, she didn't know that my insurance provider was negotiating with another company to handle claims. On July 1, 2021, when Iluka was only a few weeks into treatment, the company you work for assumed control.

On July 8, at 4 pm, Rogers called me: The new insurance had booted Iluka out, denying the first two appeals. The staff at Rogers advised me to drive up on July 9 and be ready to retrieve Iluka, just in case his psychiatrist lost the final appeal, scheduled for that morning.

The phone call came on the road. Denied.

"Do you want to pay cash?" they asked.

It's \$1,000 a day. My entire monthly paycheck wouldn't cover even a week.

So I picked Iluka up. When we returned home, I contacted every OCD therapist within sixty miles, only to be put on waiting lists or simply denied treatment, usually because his case was too severe. I did find a psychiatrist who prescribed five pharmaceuticals.

When a spot for outpatient therapy opened up in December, 2021, my son, by then self-medicating with prescriptions and street drugs, quit after a month. Instead of banging his head on floors, he started to shut down with pills, pot, shrooms and cocaine.

A year and a half later, he walked away from a scholarship at one of the top art schools in the world. Now he struggles to keep a job for more than two months. Smoking pot several times a day and suddenly quitting his medications every few months, he sleeps excessively, vomits regularly and cries daily.

Because I can work remotely, I offered him a move to Wisconsin for the Rogers outpatient program, assuming insurance would cover *that*.

He responded, "I can't, Mom. The insurance company will approve it, then yank it away. You don't understand: it was like surgery. Like they cut me open from collar to belly button. They started to operate, then sent me home

without sewing me up. I trusted them. I shouldn't have."

This is what your denial has cost my son—and me.

Sincerely,

Miel Sloan