

Insurance As a Barrier to Care: Depression Treatment Appeals in California Adolescents

Youth with major depressive disorder struggle to receive essential care; one obstacle is denial of insurance benefits for higher level of care. If denied, beneficiaries may request an independent medical review (IMR). Tools such as the Child and Adolescent Level of Care Utilization System

(CALOCUS) can assist in systematically determining level of care. We aimed to assess success of IMR appeals for higher level of care of depression in youth 11-20 years old, determine factors that correlate with success, and contextualize findings within previous studies of IMR decisions regarding mental health claims.

We analyzed IMR rulings in 11–20-year-olds with diagnoses of “depression” or “severe depression” from 2003-2021 using public data collected through the California Department of Managed Health Care. We examined impact of patient sex, service setting, and use of CALOCUS on IMR rulings using multiple logistic regression in SAS 9.4. Associations between ruling and diagnosis were analyzed by χ^2 test in SPSSv28. Average days to review claims and adopt IMR rulings were calculated.

425 claims for depression treatment were reviewed by IMR. 49.9% of cases were overturned with a mean care delay of 33.37 days. Neither service setting nor sex correlated with IMR ruling. Reviews mentioning CALOCUS were more likely to be overturned (OR=1.5, (1.04-2.3)) controlling for patient sex and service setting. IMR overturn rates between depression and non-mental health claims did not differ.

Half of initially denied claims for treatment of depression were overturned in California, suggesting that managed care organizations inappropriately deny claims and delay treatment. CALOCUS mention was independently associated with overturn. Further research is needed to determine whether CALOCUS mention impacts IMR rulings of other mental health disorders. Given the impact of CALOCUS on claim rulings, systems and providers should consider use of a standardized risk stratification instrument.