



COMMONWEALTH OF PENNSYLVANIA  
OFFICE OF ATTORNEY GENERAL

Health Care Section  
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[healthcare@attorneygeneral.gov](mailto:healthcare@attorneygeneral.gov)

June 22, 2023

[REDACTED]

Ref: [REDACTED]

Dear [REDACTED]

The enclosed correspondence is related to the complaint you filed with the Health Care Section.

Please provide us with a written response to this correspondence within fifteen (15) days of the date of this letter, so that we may further evaluate your complaint. If you need additional time to respond, please contact me as soon as possible. In addition to your response. Please provide our office with copies of any medically necessity request from your physicians to Independence Blue Cross requesting additional nutritional counseling services be approved.

Thank you for your cooperation and attention to this matter.

Very truly yours,

[REDACTED]  
Consumer Protection Agent

ap  
Enclosure(s)  
25C



June 2, 2023

[Redacted]  
[Redacted] T. Robb  
[Redacted] Philadelphia  
[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]

Sent via email [Redacted]

[Redacted]  
[Redacted]  
[Redacted]

This letter is being submitted in response to your letter dated May 8, 2023, and received by Independence Blue Cross ("IBC") on May 8, 2023, regarding Ms. [Redacted]

[Redacted]  
[Redacted] she states that she suffers from an eating disorder and that she is dissatisfied with the current health plan benefit only allowing for a maximum of six visits with a registered dietician at no cost to the member per benefit period. Ms. [Redacted] is requesting that the limit of six nutrition counseling visits per benefit period be removed and that this service be made available without any visit limit at the member's cost sharing level for visits with a specialist. Ms. [Redacted] also cites the Mental Health Parity and Addictions Equity Act (MHPAEA) as cause for why IBC should adapt its current position as it relates to nutritional counseling services. Ms. [Redacted] included a document with her complaint which is not from her member handbook, but rather her own research and sources intended to support her argument.

Ms. [Redacted] is enrolled for health insurance coverage through her employer in the Support Services for Child Advocates group health plan effective January 17, 2023, to the present. Ms. [Redacted]s plan is an HMO style health plan with access to in-network (INN) providers. Under Ms. [Redacted] health plan, six visits with an INN registered dietician are available per benefit period. These six visits are made available at \$0 member cost sharing as a preventive service and are not diagnosis driven. Meaning that the health plan does not look at the diagnosis submitted by the provider for these services. Additionally, Ms. [Redacted]s health plan includes nutritional counseling in the list

## Independence

of services that allow for direct access which means that there is no referral requirement needing to be met. Rather, Ms. [REDACTED] can seek care directly from an INN provider.

The current benefit design for nutritional counseling visits is equally available whether the diagnosis is medical or behavioral health in nature up to the limit of six visits per benefit period. While we empathize with Ms. [REDACTED] opinion that additional nutritional counseling visits are needed to treat her condition, our role is to administer the existing health plan benefit as set forth in the member's handbook which indicates that nutritional counseling visits are limited to six visits per benefit period. This means that we are not able to provide Ms. [REDACTED] with the additional nutritional counseling visits she has requested. We understand that this is not the answer Ms. [REDACTED] was seeking, but we will continue to review the current benefit for nutritional counseling visits as standards of care evolve.

Sincerely,

[REDACTED]

[REDACTED]

Senior Paralegal Specialist  
/hlw

Cc: [REDACTED], Esquire