

Missoulian

Missoula therapist fights human resources firm over confidentiality, PTSD treatment for soldiers

By **BETSY COHEN** of the Missoulian | Posted: Saturday, April 16, 2011 10:24 pm

Outraged by a change in a counseling contract that provides mental health care to military personnel and their families, a Missoula therapist is waging a one-person war to defend soldiers' rights.

Taking on this battle is David Stube, a licensed clinical counselor who is fighting Ceridian, a global human resources firm that is contracted with the U.S. Department of Defense to provide psychological health services to soldiers.

The issue came to light in January when Ceridian sent a letter to counselors it contracts with in all 50 states. The letter asked those professionals to sign an addendum that not only waives doctor-patient confidentiality, but also forces counselors to agree not to provide counseling for post-traumatic stress disorder, depression, addiction issues, or violent or suicidal behavior.

Stube refused to sign the addendum and believes Ceridian's new requirements and the Defense Department's acceptance of those changes are unethical. Now, a few months into the fray, he's recruited and gained support from Sen. Jon Tester, D-Mont.

"If you are a soldier or in a soldier's family, this means you can no longer be counseled for these conditions, even though all military websites refer all soldiers to Ceridian MilitaryOne Source counselors for these exact issues," Stube said. "The websites neglect to tell the soldiers that the counselors have agreed to not treat PTSD, depression, addiction issues and problems with dangerous angry behavior.

"Furthermore, if the counselor does not post their clinical notes after each session on the Ceridian website within three days after seeing the soldier, the counselor will not be paid," Stube said.

Jennifer Sewell, Ceridian's vice president of clinical and counseling services and the person who issued the addendum in the letter titled "Provider Network Services Quality Improvement Initiative," could not be reached for comment.

Cary Griffith, Ceridian's spokesman, refused to discuss the matter by phone with the Missoulian and would only respond to email questions with polite but opaque answers.

Regarding the issue of confidentiality and the sharing of counseling notes through email, Griffith wrote: "Everything Ceridian does, including getting copies of all session notes, is not only HIPPA compliant but in full compliance with all our Department of Defense and provider contract obligations."

Complicating things, Monica Matoush, public affairs officer with the DOD, gave the following contradictory explanation:

"Counseling is private and confidential, with the exception of mandatory state, federal and military 'duty to warn' reporting requirements," Matoush said. "It is true that counseling notes are reviewed - this is for quality assurance purposes.

"It is important to point out that any personally identifying information is not shared except in a duty to warn situation," she said. "Also, in addition to the quality assurance step, the review is necessary to establish record of payment."

Despite Stube's long relationship with the two organizations and his frustrations with the changes in the counseling contract, both Ceridian and the DOD refuse to acknowledge any new standard for services.

"The scope for Employee Assistance Program services under our contract with the Department of Defense is for nonmedical short-term counseling," Griffith wrote. "For instances in which providers suspect their clients may suffer from PTSD, depression or similar illnesses, there is a medical referral in place - since these issues usually require more concentrated, sustained medical counseling than what's provided under the EAP process."

"Nonmedical counseling," Griffith further elaborated, is defined as short-term, situational and problem-solving counseling." Some examples for this kind of counseling, he said, include: deployment stress, marital couple issues, homesickness, well-being and family relationships.

"Consultants in the affiliate network are master's-level professionals trained to recognize the need for clinical treatment of medical issues such as PTSD," Matoush explained. "If counseling reveals clinical disorder, consultants will refer the individual to military medical mental health

care providers, TRICARE or other providers for professional mental health care.

"While consultants may provide clinical services in their own private practice," she said, "that level of service is outside their scope of work as members of the affiliate network."

Explanations provided by Ceridian and the Defense Department are maddening on many levels, Stube said.

For one thing, counselors such as himself are front-line, mental-health providers to soldiers, and according to the service contract, are allowed 11 sessions with their soldier-clients.

Also, up until the addendum, PTSD, depression and addiction issues could be identified and treated in this brief counseling format, only referring the soldier to more intensive treatment if that was needed.

"Why hog-tie the counselor with a contract to not treat something the counselor is trained to do?" Stube said. "And this distinction between 'nonmedical counselors' and 'medical counselors' does not exist."

"Two wraps and a hooley," he said. "EAP counseling always addresses addiction issues and dangerousness."

"If a counselor can treat addictive issues, PTSD, depression and short-term, situational problem solving - why not just do it? Maybe that is all the counseling that soldier will ever seek."

Until the contract changes were made this year, the program worked effectively, Stube said. Soldiers and their families could gain immediate access to mental health providers in their area by contacting Military OneSource, who would direct the clients to a list of therapists in the program. This system also meant clients in Montana didn't have to wait for an appointment with the Veterans Administration in Helena or Sheridan, Wyo.

All of these issues strike at Stube's heart, not because it affects the profit margin of his business, but because he has long offered his service to the military at discounted cost because the service he provides is personal.

"MilitaryOne pays me less than half of my usual clinical rate," Stube said. "I counsel soldiers because I lost a brother, Lt. Richard Stube, on the battlefields of Vietnam.

"I have no idea how to counsel military families and soldiers while promising to send all clinical notes to be read by who knows who," he said. "I have no idea how to counsel people and not treat addiction, depression, PTSD or behaviors that are harmful to self or others."

Having learned of this quiet battle, Tester waded in, hoping to engage in a dialogue of change with Defense Secretary Robert Gates.

In a letter to Gates, Tester said he is troubled by the new guidelines in the mental-health service provider agreement and has "deep concerns" about the implications they may have regarding the care provided to military men and women.

"As you know, increasing numbers of men and women returning from Iraq and Afghanistan are in critical need of diagnosis and treatment of PTSD and other mental health conditions," Tester expressed to Gates. "Further, families of these service members have a right to treatment and to privacy that may be directly threatened by this.

"I look forward to further clarification because I count myself among those who see these policy changes as unreasonable and counterproductive."

Without mincing words, Tester asked Gates: Why has this policy changed and to what benefit?

"What is the purpose of the change as it relates to those dependent upon experienced mental health counselors who are battling the lingering effects of mental health issues such as PTSD?" Tester asked. "What is the purpose of undermining the confidentiality of the counselor-patient relationship by requiring the submission of session notes to Ceridian?"

The questions, Stube said, need to be answered.

They need to be answered for this simple reason, he said: "Our soldiers deserve the best care any time they see a counselor."

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