Request for Out-of-Network Coverage – Comprehensive Dissociation Program

To Whom It May Concern:

I am writing to formally request that my insurance plan approve and provide coverage for participation in the Comprehensive Dissociation Program (CDP) at Evolution of Self Counseling. I believe my condition—trauma-related dissociation—requires specialized, integrated care that is not available in-network, and that this program offers an evidence-based, medically necessary treatment that aligns with current clinical guidelines.

I have been diagnosed with significant trauma-related dissociation, which manifests as internal fragmentation, amnesic gaps, and impaired functioning. The treatment guidelines for dissociative disorders emphasize that such conditions require a multi-phase, long-term approach—not merely standard outpatient therapy. The International Society for the Study of Trauma & Dissociation (ISSTD) Guidelines for Treating Dissociative Identity Disorder affirm the need for structured phased care for dissociative disorders (ISSTD, 2011). Because untreated or inadequately treated dissociation often takes 5–10 years or more to resolve fully, the sooner a specialized program is initiated, the better the prognosis.

The CDP integrates evidence-based interventions, including Eye Movement Desensitization and Reprocessing (EMDR), Deep Brain Reorienting (DBR), and the Structural Dissociation Model of parts work. It also includes dissociation-specific stabilization groups such as 'Finding Solid Ground' and 'Coping with Trauma-Related Dissociation,' along with a full Dialectical Behavior Therapy (DBT) structure that provides individual therapy, skills training, phone coaching, and a therapist consultation team. Progress is tracked through the use of the Multidimensional Inventory of Dissociation (MID) to ensure accountability and outcome measurement.

EMDR has been validated through multiple randomized controlled trials and meta-analyses demonstrating significant reductions in PTSD symptoms (Chen et al., 2014; Wright et al., 2024). The Structural Dissociation framework, as outlined by van der Hart, Nijenhuis, and Steele, provides a conceptual foundation for treating trauma-related dissociation. DBR has also shown emerging evidence for effectiveness in trauma processing (Wright et al., 2023). The DBT model has a robust evidence base for improving emotional regulation and reducing self-destructive behaviors.

After extensive review of available in-network providers in South Carolina, I have been unable to locate any program offering a comprehensive, dissociation-focused track integrating these evidence-based modalities. General mental health programs exist but do not offer a comparable structure or expertise in dissociation treatment. Therefore, this request is based on medical necessity and network inadequacy.

By entering this program, I aim to shorten what is typically a 5–10 year recovery trajectory. Comprehensive, integrated treatment has been shown to reduce long-term disability and

overall healthcare costs by preventing repeated crises, hospitalizations, and fragmented care.

Given the medical necessity, strong evidence base, and lack of in-network options, I respectfully request that you authorize out-of-network coverage for the Comprehensive Dissociation Program at Evolution of Self Counseling.

Thank you for your consideration.

Sincerely,

References:

Chen Y-R, Hung K-W, Tsai J-C, et al. (2014). Efficacy of Eye-Movement Desensitization and Reprocessing for Patients with Posttraumatic-Stress Disorder: A Meta-Analysis. PLoS ONE, 9(8):e103676.

Wright SL, Karyotaki E, Cuijpers P, et al. (2024). EMDR vs. Other Psychological Therapies for PTSD: A Systematic Review and Individual Participant Data Meta-Analysis. Psychological Medicine.

International Society for the Study of Trauma & Dissociation (2011). Guidelines for Treating Dissociative Identity Disorder in Adults, Third Revision.

van der Hart, O., Nijenhuis, E., & Steele, K. (2006). The Theory of Structural Dissociation of the Personality.

Fisher, J. (2023). Treatment of Structural Dissociation in Chronically Traumatized Individuals.