

THE TEEN MAG.

Insurance Discrimination: the Mental Health Block You Need to Know About

SOCIAL JUSTICE

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As a high school junior, I am always so very proud that I am a National Board Mental Health Teen Ambassador for Bring Change to Mind (BC2M) and that I am currently training for a Teen Mental Health First Aid certification. I stand up in front of rooms full of students at my school and community to say, "It's okay to not be okay. Reaching out is a sign of strength." I tell my friends, "We are ending the stigma. Come join the movement. Go get help."

I genuinely believe that message. I am proof that young people can learn to recognize a crisis and support a peer.

However, when it was my best friend's turn, her own stress, anxiety, and the pressure of junior year piling up, she needed a professional therapist, and the system I advocate for denied her the help she needed.

She spent months pushing herself. But then, she was having panic attacks before school and the energy she used to use to help me run club meetings was now just spent trying not to cry.

She finally told her to tell her parents, "I need to talk to a professional. The stress is too much."

Her parents were amazing. They found a few highly-rated therapists. They checked all the boxes. "Yes, they are in our insurance network." Yay!

I was really proud of myself for helping my BFF reach out. I thought the hardest part was over.

But it wasn't.

Insurance Discrimination

It was a month of non-stop phone calls and waiting on hold for hours to finally receive the answer from the insurance company, "Denied!"

Not because she wasn't sick enough or not because the therapist wasn't good enough. But because of the unfair, confusing paperwork and insurance discrimination. These are some of gruesome aspects:

The therapist's name was on the insurance list, but the company claimed she was "out-of-network" or "not accepting our current plan."

Even when they found a therapist, the plan would only cover eight sessions per year.

The few "approved" therapists were so expensive that the co-pay was \$65 a session. That's money her family couldn't consistently afford, especially not on a weekly basis.

She felt a wave of shame wash over her. I'm the ambassador. I'm the one with the Mental Health First Aid certification. I tell everyone else to jump through the hoops, and here I was, paralyzed by the system to help someone in desperate need.

The True Cost of Denial

Being denied care just makes everything worse.

When people finally work up the courage to reach out and the system just blocks the treatment, it is devastating! It only multiplies mental health issues.

It confirms every fear that told you to keep quiet in the first place. It's too much work. It's not worth the money. No one cares.

Instead of getting the help she needed, she just got a lot more stress, anxiety, and resentment toward the system we all supposed to trust.

We Need More Than Slogans. We Need Solutions.

We, as teens, are doing our part. We are ending the stigma. We are talking about feelings and showing up for our friends.

We are having the training. We are having the courage.

But all of that effort means nothing if the Mental Health Parity Act, the federal law that says mental health care must be treated the same as physical health care, is not enforced.

Keep the conversation going. Don't stop fighting the stigma, but start fighting the system.

Learn the laws. Look up the Parity Act. When your parents get a denial, help them read the insurance plan's fine print. If the co-pay for a therapist is higher than for a doctor, that's illegal!

Most of us grow up thinking insurance is supposed to protect us. For example, when we get sick or get hurt, we get support. But when it comes to mental health, the rules suddenly change and are unfair. This is called insurance discrimination.

Insurance discrimination happens when companies make it harder or impossible for someone to access mental health care compared to physical health care. It's a lot of extra steps we go through, more frustrating denials, ridiculously higher costs, and a tiny list of approved therapists.

And while this rotten deal affects people of all ages, teens and young adults often feel the impact the most. We're already figuring out how to deal with the pressure cooker of school, the drama of friendships, eating disorders, family expectations, identity questions, and the overwhelming unknown of "becoming a person" thing. Mental health care should be a reliable resource, not another impossible obstacle, but insurance companies often turn it into one.

What To Do

Be honest with your parents or a trusted adult about the specifics of your needs. When your parents are fighting an insurance denial, encourage them to document everything:

Who they spoke to (name and ID number).

When they called (date and time).

What the insurance company said.

Compare the rules for mental health versus physical health.

If your family's claim is denied, tell them to appeal the decision. Insurance companies often rely on people giving up. They have to review an appeal. You are fighting for your legal right to care.

This is not just a teen issue, it's an issue for all ages. Talk to your school counselor, start a discussion in your health class, or write a letter to your local state representative. Tell them, "The law exists, but it's not being enforced, and it's blocking me and my family or friends from getting the help we need."

Don't let the system make you feel like your mental health is secondary. It is essential. You deserve equal, affordable access to wellness, and we need to hold insurance companies accountable to the law.