



# Court reinstates lawsuit accusing Kaiser of discriminating against mentally ill patients



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Gift



Mental health care workers with the National Union of Healthcare Workers picket on Aug. 16 outside the Kaiser Permanente facility on Broadway in Oakland. A lawsuit reinstated this week claims Kaiser regularly places mental patients in group therapy rather than treatment provided to patients with physical illnesses or injuries.

Screenshot

Kaiser Permanente has been fined by California for its treatment of the mentally ill. Now a state appeals court says the Kaiser Foundation Health Plan can be sued for alleged discrimination against the mentally ill by three people, including two relatives of people who committed suicide.

The nonprofit health plan provides care for Kaiser Permanente patients. The lawsuit, filed in the company's home city of Oakland, said Kaiser claims to provide all medically necessary care to its members but regularly places mental patients in group therapy rather than the individual treatment provided to patients with physical illnesses or injuries.

Their allegations, if proved, could show that Kaiser "intentionally discriminates against persons with disabilities by treating members with mental disabilities differently than members with physical disabilities," said the First District Court of Appeal in San Francisco in a ruling published

Wednesday as a precedent for future cases. The court reinstated a lawsuit that had been dismissed by an Alameda County judge.

The ruling “is very significant because it directly impacts the scope and nature of Kaiser’s mental health services, as well as the ability of individuals to bring claims regarding those issues,” said Jonathan Siegel, a lawyer for the plaintiffs.

Kaiser Permanente issued a statement Thursday expressing sympathy with the patients but disagreeing with the ruling, which it could appeal to the state Supreme Court.

One patient, a man diagnosed with bipolar disorder, was treated at a Kaiser facility for 72 hours, then released. His widow, a plaintiff in the suit, said Kaiser then placed him in group therapy, with four meetings per week with a large number of patients, mostly drug-dependent, without providing an assessment of his need for individual therapy or an explanation of his placement.

When she told Kaiser she did not believe her husband was well-suited for group therapy, she said, the company replied that was “what was available.” He later committed suicide.

Another plaintiff is the mother of a girl who also took her own life. She said the child, diagnosed with major depression, anxiety and post-traumatic stress disorder, was treated at a mental health facility for six weeks, then “automatically” placed into a group-based program without an individual assessment.

The third plaintiff is a woman who was diagnosed with major depression and said she was “pushed in(to) group therapy” without any discussion of the possibility of one-on-one care. She said she was provided “educational materials” from Kaiser that said, “We do not offer long-term individual psychotherapy.”

The court said the plaintiffs also presented evidence “that Kaiser schedules patients in a manner that makes return or repeat appointments virtually impossible, and provides staff at levels that are insufficient to allow for frequent, individual therapy for patients who need it.”

That assertion, if proved, could show that the health plan “is able to promise coverage based on medical necessity and then ... intentionally underfunds mental health treatment,” Justice Jon Streeter said in the 3-0 ruling.

The state Department of Managed Health Care fined Kaiser Permanente \$4 million in 2013 for failing to provide adequate mental health care. The company reached a settlement with the state in 2017 that included plans to shorten waiting times for mental health patients and appointment of a consultant to oversee compliance.

In August, more than 2,000 non-physician Kaiser Permanente mental health workers in Northern California [began a 10-week strike](#), with demands that included more staff to reduce waiting times for patients. They then approved a four-year contract.

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