



Treating branches instead of the tree

She had a happy childhood in Lake Tahoe, excelling at sports with her identical twin sister. After high school, the twins moved across the country to attend college on volleyball scholarships. That's where her troubles began, exacerbated by an emotionally abusive coach and a knee injury. As Amanda Elliott tells it, "My friends were not like my friends at home. My actions did not bring me happiness, and I had begun to lose myself. It was the perfect storm as things all around me crashed down. I felt shameful, spiteful, hated and hateful, and completely and totally lost. I needed an answer, a way out, a place I could breathe, and so I turned to where my coach had led me: my body."

Elliott describes running until she passed out, exercising until she vomited, and crying "into the mirror more times than I care to remember." By the time she came back to Nevada that first summer, she was experiencing serious medical issues, including oral thrush, daily fevers, stomach and back pain, hair and nails that were falling out, and a general jaundiced

condition. Her concerned mother took her to numerous medical professionals, but no one put the total picture together to diagnose what, in retrospect, was an obvious eating disorder. Instead, doctors medicated each symptom separately.

She suffered through that summer. "Every waking moment I was lying, hiding, working out, weighing myself, or crying. ... Every thought that hurtled through my mind only served to confirm the way I felt. I was worthless. I was pathetic. I was hideous. I was nothing. I had lost every part of who I was. ... I wanted nothing more than to completely disappear."

Elliott's mother insisted she see a therapist before returning to college. Although she confessed her obsession and her desire to die, the therapist told her she was fine and sent her back to school where her condition quickly deteriorated. She came home and her mother took her to the Center for Hope of the Sierras, a Reno organization offering outpatient and residential treatment for eating disorders.

Insurance issues delayed her access to the intensive residential program she needed, prolonging her agony as her body continued to fall apart. But after completing residential treatment, Elliott stepped down to the Partial Hospitalization Program and then to Intensive Outpatient Treatment, saying afterward, "It was the most painful and grueling thing that I have ever done." She successfully completed college, married her high school sweetheart, and is now employed at a job she loves while helping others who suffer from similar disorders.

Elliott's story resonated with me as I recalled an Assembly bill I sponsored in 2009 to require insurance companies in Nevada to cover all levels of treatment for eating disorders. When I visited Center for Hope, I met a woman who told me her insurance company paid more than \$100,000 in claims for severe medical complications from her eating disorder but refused to pay for residential treatment. The insurance industry lobbied heavily against the legislation, arguing that residential treatment was

too expensive and usually not necessary. The bill died in committee.

Center for Hope subsequently closed its residential treatment facility in Reno and relocated to Southern Nevada to partner with a hospital willing to build an inpatient eating disorder program. Thrive Wellness of Reno now offers local outpatient, intensive outpatient, and partial hospitalization for eating disorders.

But residential care is still needed for those, like Elliott, whose bodies are literally shutting down. It's hard to comprehend why insurance companies are willing to pay for the serious medical problems caused by eating disorders but not for the residential treatment that saved Elliott's life. It's just one more example of a health care system that doesn't work for everyone. □

Readers can read the testimony taken on A.B. 365, which Sheila Leslie references here, by going to <https://bit.ly/2XHBEgv>

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