BACKGROUND
According to the Substance Abuse and Mental Health Services Administration (SAMHSA), Clinical Social Workers (CSWs) are the largest group of mental health services providers in the United States. There are more clinically trained social workers—over 200,000—than psychiatrists, psychologists, and psychiatric nurses combined. Federal law recognizes social work as one of five core mental health professions.

CSWs have a graduate degree, master’s in social work or a doctorate, two years of supervised training in a clinical setting, and a clinical license in their state of practice. They have the training, expertise, and clinical license to diagnose and treat mental illness. Third-party payers, including Medicare, reimburse CSWs. When treating patients, CSWs use a holistic approach in providing mental health and other services, focusing on the patient’s relationship to his or her environment.

MEDICARE RESTRICTIONS AND REIMBURSEMENT ISSUES FOR CSWS
Access to Mental Health Services for Residents of Skilled Nursing Facilities:
Although CSWs have the expertise and knowledge to provide quality patient care, they are currently unable to provide mental health services to residents in skilled nursing facilities (SNFs) as independent providers under Medicare. This creates a lack of access and continuity of care for Medicare beneficiaries who are transferred from a nursing home placement where they receive mental health services from a CSW, to a SNF where they cannot receive this care, even if the patient is moved within the same building, room, or even bed.

Access to Behavioral Health Services Due to Adjustment to Medical Conditions:
In addition, under Medicare, CSWs, unlike other mental health providers (psychiatrists and psychologists), are unable to bill for critical behavioral health services, such as health and behavior assessment and intervention services that focus on an emotional problems initiated by a medical condition unrelated to a mental health condition. CSWs should have access and be reimbursed by Medicare for services that fall within the scope of their practice.

Access to Adequate Reimbursement Rates:
These restrictions are coupled with the fact that as one of the three mental health professions that provide psychotherapy services for Medicare beneficiaries, CSWs are permitted only 75% of the rate reimbursed to psychiatrists and psychologists. This rate is even lower than the 85% other nonphysician practitioners are reimbursed. With a shortage of mental health providers and during a time of growing need, this discrepancy is a barrier to Medicare beneficiaries’ health and is deterring social workers from Medicare practice. The reimbursement for CSWs needs to be addressed and updated to the rate of 85% of the physician fee schedule.

POTENTIAL POLICY SOLUTIONS
CSWs’ work is at the heart of a strengthened mental health treatment system. CSWs need to be included in Medicare Part B and be reimbursed at the same levels as other nonphysician practitioners. We urge Congress to:

» Introduce Medicare Beneficiary Mental Health Equity Act legislation to ensure Medicare beneficiaries in SNFs are able to have a choice of a social work mental health provider, access to quality care provided by a CSW, and retention of their clinical social work mental health provider when transferred to an SNF.

» Promote payment for CSWs at the rate of 85% of the physician fee schedule during the upcoming Medicare Sustainable Growth Rate (SGR) payment formula repeal efforts.

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