

February 11, 2020

The Hon. Charles Grassley  
Chairman  
Finance Committee  
U. S. Senate  
Washington, DC 20510

The Hon. Ron Wyden  
Ranking Member  
Finance Committee  
U.S. Senate  
Washington, DC 20510

Dear Chairman Grassley and Ranking Member Wyden:

The undersigned organizations respectfully urge the Senate Finance Committee to consider and advance ***the Improving Access to Mental Health Act (S. 782)***. As national organizations advocating on behalf of people with disabilities and older adults, we are acutely aware of the pressing barriers to health and mental health care faced by Medicare beneficiaries in the United States, and S. 782 will help ensure that all Medicare beneficiaries have access to high-quality mental health care across settings—including skilled nursing facilities (SNFs).

S. 782 will help to achieve this end by enabling clinical social workers (CSWs) to bill Medicare Part B the way that other mental health professionals do and to be reimbursed on par with comparable professionals. Numbering approximately 210,000 nationwide, CSWs are more abundant than other mental health clinicians in the United States.

According to the most recent Medicare Trustees Report, in 2017 there were 58.4 million Medicare beneficiaries (8.9 million adults younger than 65 living with permanent disabilities and 49.5 million adults age 65 or older), a number projected to increase to almost 80 million by 2030. Moreover, a recent Kaiser Family Foundation analysis revealed that in 2016 half of Medicare beneficiaries had incomes of less than two times the federal poverty level and one-quarter had less than \$14,550 in total savings. As the beneficiary population increases in size, changes demographically, and adjusts to challenges such as functional limitations, multiple chronic conditions, social isolation, and pain, it is imperative that our health care system is able to address beneficiaries' mental health needs. The Improving Access to Mental Health Act will mitigate this problem in three ways:

**1) Increase Medicare beneficiaries' access to mental health services in SNFs.** In 2016, nearly 2.5 million Medicare beneficiaries received care in almost 15,000 SNFs, where they receive occupational therapy (OT), physical therapy (PT), speech–language pathology (SLP) services, or skilled nursing care (among other services) to restore or maintain functional status. Beneficiaries who receive SNF services under Medicare Part A cannot receive mental health services from an independent CSW under Part B. For example, a nursing home resident might change from a level of care that does not include OT, PT, SLP, or skilled nursing care—care for which Medicare coverage is not available—to SNF care (covered by Medicare Part A) at a moment's notice. When this occurs, a beneficiary loses access to their independent CSW at a time when their health status changes and they become emotionally vulnerable. This access barrier disrupts continuity of care for any beneficiary who has been working with a CSW before receiving SNF services, but who cannot continue working with a CSW after transitioning to a SNF—a transition that can occur between a private home or assisted living and a SNF, but also within a SNF building, even without the resident's changing beds. Moreover, this barrier limits the pool of Medicare providers on which SNFs can draw to meet newly identified mental health needs of beneficiaries. S. 782 will remove this barrier by enabling independent CSWs to bill Medicare Part B, just as psychologists and psychiatrists do, for mental health services provided to beneficiaries receiving SNF

services under Part A.

**2) Increase beneficiaries' access to Health and Behavior Assessment and Intervention (HBAI) Services.**

HBAI services address emotional and psychosocial concerns that arise from medical conditions (such as a diagnosis of cancer or an exacerbation of multiple sclerosis), and which are unrelated to a mental health condition. S. 782 will enhance Medicare beneficiaries' access to services by enabling CSWs to bill Medicare Part B for HBAI services.

**3) Increase Medicare reimbursement for independent CSWs.** Currently, CSWs are paid at only 75 percent of the Medicare physician fee schedule (PFS). By increasing the Medicare reimbursement rate for CSWs to 85 percent of the PFS (the same rate paid to other non-physician health care providers, such as occupational therapists and speech–language pathologists), S. 782 will address inequities in reimbursement.

People with disabilities and older adults need to access comprehensive mental health services in SNFs and other settings. Findings from the National Academies of Sciences, Engineering, and Medicine (NASEM) September 2019 Consensus Study, *Integrating Social Care Into the Delivery of Health Care* reinforce and provide support for the provisions in S. 782. Specifically, NASEM recommended that federal agencies expand the scopes of practice for social workers in order to build the workforce to address the social (e.g. non-medical) factors that play a key role in health outcomes. The study also calls for the adequate payment of social workers to ensure a sufficient social care workforce.<sup>1</sup>

We encourage the Committee to expand mental health care access for Medicare beneficiaries by expeditiously considering and advancing *the Improving Access to Mental Health Act*.

Thank you for your consideration.

AFSCME  
Aging Life Care Association®  
Alzheimer's Foundation of America  
American Association for Psychoanalysis in  
Clinical Social Work  
American Health Care Association  
American Nurses Association  
American Society on Aging  
Clinical Social Work Association  
Council on Social Work Education

The Gerontological Society of America  
International Bipolar Foundation  
International OCD Foundation  
The Jewish Federations of North America  
Justice in Aging  
National Association for Rural Mental Health  
National Association of Social Workers  
National Council for Behavioral Health  
Postpartum Support International  
Psychiatric Rehabilitation Association

CC:

The Hon. John Barrasso  
The Hon. Michael Crapo  
The Hon. Pat Roberts

The Hon. Michael Enzi  
The Hon. Debbie Stabenow  
The Hon. Maria Cantwell

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<sup>1</sup> National Academies of Sciences, Engineering, and Medicine. (2019, September). *Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health*. Retrieved from <http://nationalacademies.org/hmd/Reports/2019/integrating-social-care-into-the-delivery-of-health-care>

The Hon. Robert Menendez  
The Hon. Thomas Carper  
The Hon. John Cornyn  
The Hon. John Thune  
The Hon. Richard Burr  
The Hon. Johnny Isakson  
The Hon. Rob Portman  
The Hon. Patrick Toomey  
The Hon. Tim Scott  
The Hon. Bill Cassidy  
The Hon. James Lankford  
The Hon. Steve Daines  
The Hon. Todd Young

The Hon. Benjamin Cardin  
The Hon. Sherrod Brown  
The Hon. Michael Bennet  
The Hon. Bob Casey  
The Hon. Mark Warner  
The Hon. Sheldon Whitehouse  
The Hon. Maggie Hassan  
The Hon. Catherine Cortez Masto