

PRACTICE ALERT

2020 UPDATES ON MEDICARE AND OTHER MATTERS FOR CLINICAL SOCIAL WORKERS IN PRIVATE PRACTICE

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In 2020, there are several important national updates that clinical social workers (CSWs) should be aware of to help them maintain an effective business and clinical practice. These updates include the areas of coding, claims, quality payment, and reimbursement.

Coding

International Classification of Diseases, Tenth Edition, Clinical Modifications (ICD-10-CM): The ICD-10-CM released its new and revised list of diagnostic codes beginning October 1, 2019 thru September 31, 2020. NASW has reviewed the

new and revised ICD-10-CM code list. As a result, no changes were noted to the mental and behavioral health section.

Place of Service Codes (POS): One new place of service code was created for Opioid Treatment Programs. It is 58, non-residential Opioid Treatment Facility (A location that provides treatment for Opioid Use Disorder on an ambulatory basis).

Current Procedural Terminology (CPT) Code Changes: There are no changes in CPT codes for psychotherapy services in 2020. However there are changes to the Health and Behavior Assessment and Intervention Codes (HBAI) which identify and address the psychological, behavioral, emotional, cognitive and interpersonal factors important to the assessment, treatment, and management of physical health problems. Some health insurers reimburse CSWs for these services. NASW has introduced the legislation, *"Improving Access to Mental Health Act"* (S. 782/H.R. 1533). This legislation would allow CSWs to bill HBAI services to additional health insurers and receive reimbursement. Beginning January 1, 2020, new HBAI codes will be implemented with an increase in reimbursement. The prior code set, 96150 thru 96155, will be deleted. NASW will make the new HBAI code list available to its members in a pending Practice Perspective which will be posted at <https://www.socialworkers.org/Practice/Clinical-Social-Work>

Claims

New Medicare Beneficiary Identifier (MBI): The Centers for Medicare and Medicaid Services (CMS) has completed its mailing of new Medicare cards. In order to protect a beneficiary privacy, the new cards do not include Social Security numbers. Instead, they include MBIs. CSWs and other Medicare providers are required to use the MBI when filing a claim for reimbursement. Effective January 1, Medicare will reject claims submitted with the Health Insurance Claim Numbers (HICNs). CSWs should request their current Medicare patients to provide their new Medicare number and use it to avoid claim rejections. Additional information about the MBI is pending in a new NASW Practice Alert which will be posted at <https://www.socialworkers.org/Practice/Clinical-Social-Work>

Quality Payment

Medicare's Quality Payment Program Merit-based Incentive Payment System (MIPS): MIPS will exclude CSWs during the 2020 reporting period. CMS announced that they have finalized a CSW measure set in the event CSWs are added to the MIPS eligibility list through future rulemaking. The measure code set includes 14 measures identified by CMS for appropriate use by CSWs. The measures include the following:

- Documentation of Current Medications in the Medical Record
- Preventive Care and Screening: Screening for Depression and Follow-Up Plan
- Elder Maltreatment Screen and Follow-Up Plan

NASW will make the list available to its members in a pending Practice Alert which will be posted at <https://www.socialworkers.org/Practice/Clinical-Social-Work>

Reimbursement

Medicare Increase of Four Per Cent in 2020: CSWs are one of several providers to receive an increase in reimbursement due to misvalued codes and/or new and revised codes. CSWs should be receiving information from their Medicare Administrative Contractor regarding plans for implementation of this increase.

For 2021, CSWs should be aware of the following:

Negative 6 percent Medicare Fee Adjustment: CMS has released an Interim Rule to increase payment for office/outpatient Evaluation and Management (E&M) services citing the complexity of services as one of the determining factors. CSWs and most nonphysician providers do not provide E&M services. Consequently, they may be receiving a decrease while those providers who are eligible to seek reimbursement using E&M codes may receive an increase.

CMS cautions that any potential coding changes and recommendations in the evaluation of new and existing codes between 2020 and 2021 may change the estimated decrease for CSWs and other providers. NASW has submitted comments to CMS strongly opposing the negative fee adjustment and is working

in coalition with other organizations to prevent this Interim Rule from being implemented.

Professional Liability Insurance: Every five years, CMS updates the professional liability insurance premium data. CSWs were assigned a risk factor of 1 which is the lowest risk factor a provider can receive. Thus, the professional liability insurance premium for clinical social workers should remain low.

Other Updates

Telehealth Services: Although new bundled billing codes have been developed for Opioid and Substance Use Treatment Programs, there are no changes in telehealth services for CSWs in private practice. Please note that beginning July 1, 2019, substance use disorder (SUD) treatment is not required to be delivered at an originating site as other Medicare telehealth services. Telehealth services for patients with SUD may be treated in a home or other outpatient setting.

Skilled Nursing Facilities (SNFs): CSWs in independent practice will continue to be reimbursed for mental health services only under Medicare Part B in a nursing facility. CMS will continue to enforce its policy for the collection of overpayment for mental health services provided by CSWs in SNFs. Through the *Improving Access to Mental Health Act* (S. 782/H.R. 1533), NASW is advocating for a change to this regulatory policy.

Physician Self-Referral Law: This law prohibits a Medicare provider from referring a Medicare beneficiary for certain designated health services to a group, organization, or other provider in which the CSW or other provider may have a financial relationship. It also prohibits a group, organization, or other provider from submitting claims to Medicare for a patient who receive designated health services that are furnished as a result of a prohibited referral.

For 2020 the following providers have been added to the Physician Self-Referral List – physical therapy, occupation therapy, and outpatient speech-language pathology services. Deletions to the list include biofeedback and cognitive skills development.

Ambulance Transport: CSWs are one of the health care providers who can now sign for ambulance transport from a facility in cases where they are familiar with the patient's care. This will help expedite discharge and transport of psychiatric and other patients in the absence of a physician.

Self-Administered Esketamine: Medicare has approved the use of esketamine for patients who suffer from "Treatment-Resistant Depression (TRD)." It is a nasal spray used in conjunction with an oral antidepressant which must be administered in an office setting where the patient is observed for two hours. Although CSWs do not administer drugs, it is important for them as mental health providers to be aware of this approval.

For additional information about 2020 updates, visit *2020 Medicare Physician Fee Schedule Final* at: <https://s3.amazonaws.com/public-inspection.federalregister.gov/2019-24086.pdf>