BACKGROUND
Health and Behavior Assessment and Intervention (HBAI) services are a current benefit available to Medicare beneficiaries. HBAI services are used to identify and address the cognitive, emotional, behavioral, and social factors that are important to effective treatment or management of physical health problems that are unrelated to mental illness.

Clinical social workers (CSWs) are the largest group of mental health service providers in the United States and are among the professionals that can bill Medicare Part B for mental health services.iii However, CSWs cannot currently bill Medicare for HBAI services, even though they are within their scope of practice.

The National Academies of Sciences, Engineering, and Medicine in its September 2019 Consensus Study, Integrating Social Care Into the Delivery of Health Care, recommended that federal agencies expand the scopes of practice of social workers in order to build the workforce to address the social (that is, non-medical) factors that play a key role in health outcomes. These factors, also called the social determinants of health, include stable housing, reliable transportation and economic security. There is consistent and compelling evidence that addressing the social factors in health is critical in improving prevent and treatment of acute and chronic illnesses.

The study also calls for the adequate payment of social workers to ensure a critical in improving preventative and treatment of acute and chronic illnesses.

Increasing the availability of HBAI services is important to improving Medicare beneficiaries’ access to needed health care and reducing Medicare costs. More than 90% of the nation’s health care expenditures are for Medicare beneficiaries and reducing health care costs. The service providers in the United Statesi and are among the professions that can bill Medicare Part B for mental health services.ii However, CSWs cannot currently bill Medicare for HBAI services, even though they are within their scope of practice.

The current Medicare statute—Section 1861(hh)(2) of the Social Security Act—reads:

The term “clinical social worker services” means services performed by a clinical social worker for the diagnosis and treatment of mental illness… which the clinical social worker is legally authorized to perform under state law in which such services are performed as would otherwise be covered if furnished by a physician or an incident to a physician’s professional services.v

The Improving Access to Mental Health Act includes language that would ensure CSW services explicitly include the provision of HBAI services to beneficiaries. This would both allow CSWs to be reimbursed for HBAI services under Medicare Part B and increase access to care for seniors.

SOLUTION: EXPAND DEFINITION OF “CLINICAL SOCIAL WORKER SERVICES” IN THE SOCIAL SECURITY ACT

For purposes of independent reimbursement under Medicare Part B, the Social Security Act currently defines clinical social worker services narrowly and, in a manner, not representative of CSWs’ full scope of practice.iii

To enhance Medicare beneficiaries’ access to HBAI services, the Social Security Act definition of “clinical social worker services” must be expanded to specifically include HBAI services.

The Improving Access to Mental Health Act (S. 782/H.R. 1533), introduced by Senators Debbie Stabenow (D-MI) and John Barrasso (R-WY) and Representative Barbara Lee (D-CA-13), expands the definition of “clinical social worker services” to include HBAI services.

LEGISLATIVE SOLUTION

The Improving Access to Mental Health Act (S. 782/H.R. 1533), introduced by Senators Debbie Stabenow (D-MI) and John Barrasso (R-WY) and Representative Barbara Lee (D-CA-13), expands the definition of “clinical social worker services” to include HBAI services.

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EXAMPLES

A beneficiary with diabetes faces multiple challenges in understanding and managing the illness. HBAI services help the beneficiary identify and address emotional barriers to monitoring blood sugar levels, as well as familial resistance to change in eating habits and lifestyle adjustments. This support can prevent stroke or amputation and the substantial health care costs associated with complications from diabetes.

A beneficiary with a recent ophthalmology diagnosis faces social and emotional barriers to managing treatment (for example, attending medical appointments and communicating effectively with health care providers, managing stress (such as recognizing and avoiding triggers), and adjusting lifestyle (for instance, adjusting routine and reducing stress). HBAI services, which include psychoeducation, help the beneficiary identify and address these barriers.

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