



## **PRACTICE ALERT**

# **2019 MACRA REPORTING FOR CLINICAL SOCIAL WORKERS IN PRIVATE PRACTICE**

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The Medicare Access and Chip Reauthorization Act of 2015 (MACRA) ended the Sustainable Growth Rate formula for clinical social work reimbursement and established a quality payment incentive program known as the Quality Payment Program (QPP). This program provides clinical social workers who are Medicare providers with two ways to participate: (1) the Merit-Based Incentive Payment System (MIPS) and (2) The Advanced Alternative Payment Models (APMs).

For social work purposes, clinical social workers who work in health care organizations are most likely to participate in APMs and report measures as an “incident to” provider. Clinical social workers who are Medicare providers in private practice would participate in MIPS.

MIPS has several areas of participation:

- Low volume threshold is an exclusion to those who submit less than \$90,000 in Part B allowed charges of covered psychotherapy services or have less than 200 Medicare Part B enrolled patients.
- Virtual groups require a small practice of 15 or fewer clinicians who join other groups identified by CMS to report measures together.

- Individual measures require providers to report measures by claims as they did when reporting the Physician Quality Reporting System (PQRS) or they may hire a registry to report the measures for them.

In June 2019, CMS-1693-P, the proposed rule for the 2019 physician fee schedule, listed clinical social workers as eligible providers for the 2019 quality payment program. NASW responded to the proposed rule with the following comments that shared why it would be problematic for clinical social workers to report quality measures successfully in 2019.

- NASW commented on clinical social workers' ability to meet performance expectations in the quality performance category. While there are more than six measures available in the mental and behavioral health measure set, there are four claims measures appropriate for use by clinical social workers as determined by eligible Current Procedural Terminology (CPT) codes and scope of practice. Most clinical social workers utilize claims-based reporting. NASW expressed concerns that clinical social workers would not have six quality measures available. The association requested the Centers for Medicare and Medicaid Services (CMS) to consider excluding clinical social workers inclusion in MIPS for the 2019 Performance Year just as it had proposed exclusion for several other non-physician practitioners who also had less than six measures to report.
- In addition, there were only two outcome measures in the mental and behavioral health measure set for clinical social workers and they required the utilization of the PHQ-9 measure which is only reportable by an electronic health record. When clinical social workers do not utilize an electronic health record, they encounter further limitations to reporting appropriate measures.
- NASW expressed concern that lack of appropriate quality measures would result in a negative payment adjustment. The 2019 negative payment adjustment is significant at a minus seven percent. Clinical social workers conveyed to NASW substantial financial hardship when the negative two percent payment adjustments were applied under PQRS. A negative seven percent adjustment appears punitive to clinical social workers who do not have enough measures to meet the measure reporting requirements.

Other comments by NASW to the proposed rule on quality payment are available at:

<https://www.socialworkers.org/LinkClick.aspx?fileticket=7KlwJCZF-6c%3d&portalid=0>

As a result of NASW's comments to the proposed rule, CMS excluded clinical social workers as eligible providers to the 2019 quality payment program. For clinical social workers, the exclusion means they

- (1) Are not required to report measures the Medicare quality payment program reporting year of 2019

- (2) May voluntarily report measures, however, they will not receive a positive nor negative payment adjustment when doing so
- (3) Will not have the opportunity to increase their Medicare reimbursement in 2019.

Currently, it is unknown whether clinical social workers will become eligible reporting providers in 2020 for the quality payment program. Other than a lack of opportunity to increase Medicare reimbursement in 2019, the negative implications of the MIPS exclusion are unknown for the future.

For several years, NASW has been advocating for Medicare quality payment measures for clinical social workers. NASW encourages its members to become familiar with using Medicare measures in order to become prepared for reporting status in 2020 should they become eligible providers. For now, the 2019 MIPS exclusion is a victory for clinical social workers who have reported relief and contentment for the exclusion.

Additional information on the Medicare quality payment program is available at:

<https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/Year-3-Final-Rule-executive-summary.pdf>