Increase Medicare Beneficiaries’ Access to Health Behavior Assessment and Intervention Services

BACKGROUND
Health 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. 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 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 prevention and treatment of acute and chronic illnesses. The study also called for the adequate payment of social workers to ensure a sufficient social care workforce.

Ensuring access to qualified HBAI providers is critical to meeting the needs of the growing population of Medicare beneficiaries and reducing health-care costs. More than 90% of the nation’s health care expenditures are for chronic illness, such as heart disease, diabetes, and cancer. Millions of Medicare beneficiaries live with chronic illness, and most live with two or more chronic conditions. HBAI services help beneficiaries address challenges associated with these chronic illnesses, as well as with acute illnesses.

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

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. 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.

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