



March 11, 2014

Brad Grantz, Legislative Aide  
Rep. Tim Murphy (R-PA)  
House of Representatives

Dear Brad,

Thanks for meeting with us on Friday, February 28, and for sharing the Detailed Summary of The Helping Families in Mental Health Crisis Act (H.R. 3717).

The Clinical Social Work Association (CSWA) and the National Association of Social Workers (NASW) are impressed with the comprehensive scope of this bill, which pulls together so many critical aspects of mental health care in the USA – from basic needs, to successful initiatives, reduction of stigma, and ongoing concerns.

We commend your position that psychotropic drugs continue to be a 'protected class' of medication; as we all know, the need for access to a variety of these medications is essential. Rep. Murphy's attention to this important issue has had a significant impact, and the unanimous request of the Subcommittee on Health that CMS maintain this status is much appreciated.

CSWA and NASW look forward to hearing Rep. Murphy's feedback on the following issues we discussed:

- *Inclusion of LCSWs as part of the proposed Serious Mental Illness Coordinating Committee* (page 16, line 19ff: Additional Members). What a Licensed Clinical Social Worker would bring to this mix that differs from the contribution of the Psychiatrist and Psychologist is the experience of providing ongoing bio-psycho-social treatment in the context of family and community.
- *Extension of EHR incentive funding to LCSWs as well as psychologists* (page 81, line7ff:Sec.902) Clinical Social Workers have the expertise and skills to provide mental health services comparable to the "qualified psychologist services" referenced in the Section, and, like psychologists, will need information systems that can be linked to those of other caregivers and health care providers.
- *Restoration of clinical social workers as providers in skilled nursing facilities.* Although this is not addressed in HB3717, we hope that Rep. Murphy will give this issue consideration. When Medicare beneficiaries are transferred from nursing homes to skilled nursing facilities, they are forced to discontinue mental health treatment from clinical social workers until they are transferred back into a Part B level of care in the nursing homes. This termination of services during transfer of services has been devastating to many Medicare beneficiaries during a vulnerable time when they require continuous mental health treatment. We ask that clinical social workers be allowed to continue to treat Medicare beneficiaries when their health requires skilled care.
- *Increase in LCSW reimbursement rates to be at parity with those of psychologists and psychiatrists for psychotherapy services.* Again, this issue is not been part of HB3717, but we are hopeful that it can be addressed. We hope Rep. Murphy will agree that we clinical social workers are equally deserving of equal pay for equal psychotherapy work.

- *Consideration of reimbursement for mileage when travel to the homes of Medicare and/or Medicaid beneficiaries is necessary* (page 24, line 1ff: Sec. 104) Just as telepsychiatry and telehealth services expand the reach of healthcare, when necessary, beyond the medical office model, clinical social workers - especially those working with the elderly – take treatment to where it is needed, when clients are of necessity homebound. We hope that reimbursement for mileage can be an option.

During the meeting, we mentioned concerns about the use of block grants to fund integrated mental health services, and you pointed out that you have built in accountability. Our review of the Detailed Summary is somewhat reassuring, but we nevertheless remain concerned, and hope that you will reconsider. Block grant funding has been diverted to purposes other than its intended use in the past.

One final request: CSWA and NASW urge you to correct the term “mental health social workers” where it appears in the Detailed Summary, Title IV, paragraph 1, to “clinical social workers”. This is the term that is used to describe social workers who have a clinical social worker who has a license to provide mental health services.

It was a pleasure for us to meet with you. We look forward to being of assistance to you and the Representative on this and other mental health concerns.

Thanks again for your consideration of our views.

Best regards,

Sincerely,

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