NASW National Association of Social Workers / Connecticut Chapter

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Testimony on SB 1360:
AAC the Availability of Optional Services Under the Medicaid Program:
Human Services Committee
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Submitted By: Stephen A. Karp, MSW, Executive Director

On behalf of the National Association of Social Workers, CT Chapter, representing over 3500 members, we offer this testimony on SB 1360.

NASW/CT supports the inclusion in Medicaid of those providers listed in SB 1360, as it is important that Medicaid offer a full selection of health care services rendered by a range of providers that at minimum is equal to those providers under HUSKY. Thus we request that the list of providers in SB 1360 be amended to include licensed clinical social workers for direct reimbursement.

As of last year Licensed Clinical Social Workers (LCSW) have been eligible providers under the HUSKY/Behavioral Health Partnership (BHP). In fact the Department of Social Services (DSS) reached out to NASW/CT to help the Department in actively recruiting LCSW's and at this time there are over 300 LCSW's as providers under the BHP. However, LCSW's are still not eligible for provider status under traditional Medicaid, which makes absolutely no sense!

In the State of Connecticut clinical social workers have been licensed as independent practitioners since 1995 and previously were certified going back to 1985. Since 1990 state statute has required private sector insurance companies to reimburse clinical social workers for diagnosis and treatment of behavioral health conditions, including substance abuse. In addition Medicare, the Federal Employees Health Benefits Program and TRICARE/CHAMPUS all recognize licensed clinical social workers as mental health practitioners who are eligible for direct reimbursement independent of physician referral or supervision. Since 2004 DSS has recognized LCSW's for verifying incapacity for employment of a client who is receiving Temporary Financial Assistance (DSS Uniform Policy Manual section 8540.03 C Exemptions from Time Limits). As previously stated, last year DSS began recognizing LCSW's for HUSKY under the BHP. Such widespread and long-standing recognition is sufficient cause for amending SB 1360 to include LCSW's in the list of optional providers.

Besides the issue of the wide recognition of clinical social work, inclusion of LCSW's in all appropriate Medicaid programs offers the following advantages to the State of Connecticut and Medicaid recipients:

- LCSW's are cost effective and are accessible throughout all parts of the state. This will help alleviate the serious shortage of qualified mental health providers willing to accept Medicaid.

- Clinical Social Workers offer a range of behavioral health and case management services. Often Medicaid patients need more than just counseling and social workers are specifically trained in providing a range of services besides treating the individual's mental health needs.

- Inclusion of LCSW's will eliminate the confusion as to whether or not LCSW's are recognized as reimbursable providers. Currently many LCSW's do not even consider pursuing provider status with HUSKY/BHP since it is a widely held belief amongst clinical social workers that Medicaid does not cover LCSW's under any circumstances

Approximately two-thirds of all mental health treatment in this country is provided by clinical social workers. In CT clinical social workers are practicing in every part of the state and we estimate that at least 400 LCSW's in independent practice, and many in agency practice, would accept Medicaid patients if offered the opportunity.

By amending SB 1360 the Human Services Committee is making a statement to DSS that it is time to include licensed clinical social workers as approved providers for all appropriate Medicaid programs.

For the Committee's reference the following is the CT Scope of Practice for clinical social work:

"*the application, by persons trained in social work, of established principles of psychosocial development, behavior, psychopathology, unconscious motivation, interpersonal relationships and environmental stress to the evaluation, assessment, diagnosis and treatment of biopyschosocial dysfunction, disability and impairment, including mental, emotional, behavioral, developmental and addictive disorders, of individuals, couples, families or groups. Clinical social work includes, but is not limited to, counseling, psychotherapy, behavior modification and mental health consultation.*