



COUNCIL ON SOCIAL WORK EDUCATION

STRENGTHENING THE PROFESSION OF SOCIAL WORK
Leadership in Research, Career Advancement, and Education

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The Honorable Ron Wyden
Chairman, Senate Committee on Finance
221 Dirksen Senate Office Building
Washington, DC 20002

The Honorable Mike Crapo
Ranking Member, Senate Committee on Finance
239 Dirksen Senate Office Building
Washington, DC 20002

Dear Chairman Wyden and Ranking Member Crapo,

On behalf of the [Council on Social Work Education \(CSWE\)](http://www.cswe.org) we appreciate the opportunity to respond to the Committee on Finance's request for information (RFI) regarding recommendations that will improve access to healthcare services for Americans with mental health and substance use disorders (SUDs). CSWE is the national association representing social work education in the United States. Its members include over 800 accredited baccalaureate and master's degree social work programs, as well as individual social work educators, practitioners, and agencies dedicated to advancing quality social work education. Through its many initiatives, activities, and centers, CSWE supports quality social work education and provides opportunities for leadership and professional development, so that social workers play a central role in achieving the profession's goals of social and economic justice.

CSWE is very supportive of the Committee's efforts to enhance behavioral health, in particular as it relates to strengthening the behavioral health workforce. Social workers are an essential part of the health care continuum and perform an important role in assisting American's who suffer from mental health and SUDs. Below are our responses to the questions in the RFI:

What policies would encourage greater behavioral health care provider participation in these federal programs?

Clinical social workers (CSWs) are the largest group of behavioral health care providers in the country and are included in the health professions that can receive reimbursement. Medicare Part B for mental health services. CSWs, who have extensive education and training and employ a holistic approach in providing services that focus on biological, psychological, and social factors, are able to bill Medicare Part B for the diagnosis and treatment of mental illness. However, CSWs are unable to bill Medicare Part B for psychosocial services in skilled nursing facilities (SNFs) or for Health and Behavior Assessment and Intervention (HBAI) Services, even though they fall with CSWs' scope of practice. Increasing the Medicare reimbursement rate for CSWs for services behavioral and mental health services to those on par with psychiatrists and psychologists would be an appropriate first step in encouraging greater participation. Medicare reimburses CSWs at only 75 percent of the physician fee schedule while



psychiatrists and psychologists are reimbursed 100 percent of the fee schedule. Additionally, the CSW rate is even lower than the 85 percent rate at which other non-physician practitioners are reimbursed. In an effort to achieve this parity, CSWE has endorsed the *Improving Access to Mental Health Act of 2021 (S. 870/H.R. 2035)*.

What barriers, particularly with respect to the physician and non-physician workforce, prevent patients from accessing needed behavioral health care services?

Increasing beneficiary access to behavioral and mental health services in SNFs and access to HBAI services provided by CSWs would help remove existing access barriers for beneficiaries seeking critical care. As it stands, beneficiaries who receive SNF services under Medicare Part A cannot simultaneously receive services from an independent CSW under Part B. This restricts the pool of practitioners individuals can access. Correcting this will enhance beneficiaries access to CSW behavioral care providers. A similar barrier exists for HBAI services. An access barrier exists because Medicare Part B reimbursement for independent CSW services is restricted to the diagnosis and treatment of mental illness and not HBAI services. Expanding this definition to include HBAI will remove an additional access barrier for beneficiaries.

What policies would most effectively increase diversity in the behavioral health care workforce?

Federal investments in programs to ensure a health care workforce that reflects the communities where health care professionals serve should continue and increase. A diverse and culturally competent health workforce is critical to addressing the country's changing health care needs. Programs like the Minority Fellowship Program (MFP), administered by the Substance Abuse and Mental Health Services Administration (SAMHSA), are good examples of programs that should be expanded and replicated. In particular, MFP fellowships aim to reduce health disparities and improve behavioral health care outcomes for racial and ethnic populations. Through seven national behavioral health organizations, which includes CSWE, some 200 MFP fellows are awarded educational scholarships and receive training each year under the program. MFP training includes professional development seminars or webinars on cutting-edge behavioral health practices and sponsored attendance at professional conferences and meetings. It might also include practicum placements, externships, and internships that provide unique mentoring, supervision, and clinical interactions with racial and ethnic minority populations. According to SAMHSA, MFP fellows often go on to serve in key leadership positions in behavioral health treatment services, policy and program development, services supervision, services research, training, and administration.

What federal policies would best incentivize behavioral health care providers to train and practice in rural and other underserved areas?

Federal policies should reflect the importance of education and training programs for health professions, which includes social work, to successfully increase the number of health professionals



prepared to work in integrated team-based environments, especially in rural and underserved areas, and help meet the increasing health demands in the United States. CSWE believes that robust federal investments should be made in health care workforce programs that include social work. In addition, policies that allow a professional to perform to the full extent of training and/or licensure in a health care setting are critical to meeting the increased health demands in the U.S., particularly in rural and underserved areas. To meet the growing and diverse needs of patients, medical education policies and federally-funded demonstration projects that focus on rural and underserved areas should be expanded and replicated to support graduate and undergraduate education for social workers. In particular, Title VII programs of the *Public Health Service Act* (42 USC 292 et seq.) administered by HRSA and aim to strengthen the health professions workforce by providing rural and underserved populations financial assistance and opportunities to receive training, should be expanded.

Which characteristics of proven programs have most effectively encouraged individuals to pursue education and careers in behavioral health care?

The Public Service Loan Forgiveness (PSLF) program was created in 2007 to encourage students to pursue public service careers. For professions like social work, where wages are often lower when compared to other professions, PSLF encourages professionals to pursue opportunities in critical high-needs areas. Social workers provide invaluable service, very often public service, to society. Recognizing this service through programs like PSLF, will allow more students to pursue the profession, and allow them to achieve important financial milestones in their own lives. Efforts must also continue to ensure that implementation of the program is conducive to ensuring participants are able to access benefits they have earned.

Additionally, graduate education is vital to professions that serve communities throughout the U.S. including social work. While the bachelor's degree is the entry-level professional degree in social work, a master's degree in social work (MSW) is required for areas of specialized practice (such as behavioral health and substance abuse). Efforts that have made graduate education more expensive, such as eliminating graduate student eligibility for Federal Work Study funds, and the elimination Grad PLUS loans, will force students to take out private loans or make it so only wealthy students can pursue graduate education. In light of the continuing demand for social workers to assist with mental health, substance-use disorders, and aging populations, social work programs should be designated for inclusion in the Graduate Assistance in Areas of National Need (GAANN) program and expand Pell eligibility to graduate education. Education and training grants such as the Health Resources and Services Administration (HRSA) Behavioral Health Workforce and Education Training (BHWET) program should be expanded and replicated in order to provide more students with the opportunity to pursue careers in social work and behavioral health care.



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What policies could improve and ensure equitable access to and quality of care for minority populations and geographically underserved communities?

Federal health care policy should reflect the value of coverage and access to care, especially among the nation's most marginalized and underserved populations. To ensure access to and quality of care for underserved populations, continued robust investments are needed to maintain and expand the behavioral health-care workforce to meet the challenges facing minority populations and geographically underserved communities. CSWE commends Congress for making investments in mental and behavioral health workforce programs at HRSA. CSWE encourages continuous efforts to support the pipeline for professionals to meet the health care needs of minority and geographically underserved communities. All HHS agencies, including CMS, should look to replicate proven workforce programs in order to develop a culturally competent workforce and provide care for minority and geographically underserved communities.

Thank you for taking the time to consider this request and providing the opportunity to express my views. I know you are faced with many difficult decisions, but support for these programs and the behavioral health care workforce is essential to improving access to treatments for all Americans who face mental health challenges.

Sincerely,
Darla Spence Coffey,

Darla Spence Coffey, PhD, MSW
President and Chief Executive Officer
Council on Social Work Education