

# SCSW W NEWSLETTER

SOCIETY OF CLINICAL SOCIAL WORKERS

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## LEGISLATIVE SCENE

The Society is continuing to actively pursue licensing legislation for social workers. We have intensified our contact with the leadership of NASW in an attempt to draft a bill acceptable to both NASW and SCSW. Discussions with NASW concerning legislation are in progress at the time of the writing of this Newsletter and we certainly are hoping for positive results. Also, as in the past, we are cooperating with other groups who are interested in legal regulation of the mental health field.

Aside from licensing, SCSW is planning to make efforts to have clinical social workers included in Medicaid and private insurance contracts. However, priority in terms of financing and time will be given to licensing legislation.

\*\*\*\* Quick Response Needed \*\*\*\*

Time, tide and the legislative process wait for no man. We are anticipating needing the active participation of members in telegraphing their legislators in Albany and Washington regarding legislation vital to the interests of clinical social workers. If you are called and asked to send a telegram or contact other members, please make every effort to cooperate. It is in the nature of the legislative process that we are usually notified only a day or two before an important bill is to be heard in committee or voted on. In this situation, prompt action is called for. For example, we were called to support the Wolde Bill (described below) only two days before the bill was discussed in committee. We thank those members who responded to our request for telegrams, and urge others to be prepared to do the same in the future.

## FEDERATION MEETS IN LOS ANGELES, OCTOBER 10th - 12th NATIONAL LEGISLATION AND FISCAL PLANNING DISCUSSED

Alan Grossman, President, represented New York State SCSW at this meeting of the Federation of Societies for Clinical Social Work. He reports that the two major areas of discussion were developments on the national legislative scene and internal fiscal planning for the Federation.



\*\*\*\* National Legislation \*\*\*\*

Dr. Pat Hewitt (Legislative Advocate of the Federation) reported on a bill sponsored by Representative J. Waldie of California. The Bill (HR 9440) would amend the Federal Employee Benefit Act to include psychologists and optometrists as providers of service without previous physician referral to federal employees. Dr. Hewitt approached the Sub-Committee on Federal Employee Benefits that was holding hearings on the bill to amend the bill further to include social workers. After some negotiations, Waldie agreed to this. However, because of the timing of the legislation, the amendment to include social workers will have to be offered as a separate amendment from that including psychologists and optometrists. This means that it will have to be discussed further in Committee. The Federation Board took the position that the amendment should read that "Licensed Clinical Social Workers at the Master's Degree Level" should be eligible to provide services under the provisions of the of the Bill. This stand was taken because it is felt that it will provide an impetus to clinical social workers nationwide to secure licensing in their respective states.

Dr. Hewitt advises us that when the amendment is brought up in Committee, we should be prepared to send telegrams to members of the committee urging its passage. It is necessary for the representatives to know that persons are interested in the amendment. Without support of a constituency, the representatives cannot make a strong bid for inclusion of an amendment.

The Long-Ribicoff Bill, a bill to cover "catastrophic illness" was discussed. The Bill provides hospital and post-hospital coverage for major illnesses. There is a \$2000 deductible clause. Dr. Hewitt explained that while payments to social workers are included in the Bill, the kind of illnesses covered and the deductible clause makes it not of much benefit to clinicians.

A revised estimate of the timetable for National Health Insurance was offered. It is now thought that such coverage is five to seven years off, rather than three to five years as was previously thought.

A legal suit brought by CAPPS (Council for Advancement of Professional Psychological Services) against Blue Cross for restraint of trade was discussed. This suit argues that psychologists should be reimbursed under Blue Cross contracts. The Federation can join the suit as plaintiffs if we can show the court that we have a legal interest in the case. It would mean that we too would sue Blue Cross, in a separate action, but that both suits would be heard by the court at the same time.

Dr. Hewitt is evaluating the CAPPS suit to determine what action we will take on this issue.

\*\*\*\* Fiscal Planning \*\*\*\*

Budget priorities for the National Federation were the topic of the Fiscal Planning Committee that met in conjunction with the Federation meeting. The following priorities for expenditures from the Federation Treasury were established:

1. Help to State Societies: This includes outlays of funds to develop new state societies, to help States expand their membership and to aid states to secure licensing for clinical social workers.



2. Establishing a central organization for the Federation: Essentially, this translates into the hiring of an Executive Director for the Federation. At the present time, our finances only permit hiring such a person on a quarter-time basis.

3. Retaining a National Legislative Advocate.

Any further expenditures on a national level (e.g. legal suit against Blue Cross) would require a special assessment of the membership.

At present, the formula for repate of dues to the National Federation includes a payment of \$500 per state to cover administrative costs and a \$20 per member assessment for our legislative advocate. A new formula was arrived at to take into account the situation of a State Society that has a rapid growth of membership in one year. The State Society will not be expected to pay the \$20 per member assessment in excess of 50% more of what it paid in the previous year.

### CLINICAL SOCIAL WORK JOURNAL

Mary Gottesfeld, Editor, reports that our Journal has been very well received in the professional community. In response to inquiries regarding publication policies and in order to encourage members who wish to submit manuscripts, Ms. Gottesfeld has prepared a statement regarding the Journal from which we summarize the following points:

1. Many manuscripts are submitted and an average one in five is accepted. Acceptance is based on many factors, including space and timeliness of the topic. The type of article with the most favorable chance for acceptance is a clinical paper with appropriate case material. Articles on theory and history are a close second. Research articles directly related to clinical practice are acceptable as are articles on psychohistory. Least acceptable would be papers on administration, curriculum development, community organization, etc.

2. All case data must be carefully disguised to protect the client's confidentiality. Authors with questions about the suitability of the topic or those who wish to do a book essay/review in the style illustrated in the Journal should feel free to correspond with the Editor.

3. The form of the manuscript should correspond to that published in the Journal. More specific details can be found on the inside cover of the Journal.

4. If a paper is not accepted and the author identifies himself as a member of SCSW, a referral of the manuscript will be made to one of the other ten journals published by Behavioral Publications, if it seems to be a possibility for another journal.

We remind SCSW members that the Clinical Social Work Journal has been provided free of charge for one year to Fellows and Members. Subscriptions are available through Behavioral Publications, Inc., 2852 Broadway, New York, New York 10025; Phone (212) 662-3100. Those wishing to correspond with the Editor should address their letters to Mary L. Gottesfeld, M.S.S., Editor, 285 West End Ave., New York, New York, 10023.