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THE NEWSLETTER OF THE NEW YORK STATE SOCIETY FOR CLINICAL SOCIAL WORK

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LEGISLATIVE COMMITTEE

Our 50-Year Legislative Agenda is Almost Complete!

By Marsha Wineburgh, DSW, LCSW-R, Chair

e have had a very successful legislative session in 2019. Several important bills were passed and signed into law. These victories—the Parity Law and the inclusion of LCSWs in Workers' Compensation—almost complete the Society's 50-year legislative agenda.

The Parity Law makes all insurers who offer policies in New York more accountable to the Department of Financial Services (DFS), a state agency that is now empowered to track insurance activity in more detail. Mandated annual reports to DFS require specific information on such data as how many mental health sessions have been denied, how many sessions are allowed per patient before questioning medical necessity, and how many active providers are on their panels. DFS is serious about taking insurance complaints. If you have a complaint, file it online. They are encouraging feedback from the field.

Our second successful bill enacts mental health coverage for workers' compensation patients. Until now, only psychiatrists and psychologists could be reimbursed for psychotherapy services. Finally, we are included!

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THE 2019 ANNUAL MEMBERSHIP MEETING, in Irvington on the Hudson, provided opportunities for networking among colleagues from across the state. See pages 3, 4 and 5.

Legislative Committee Continued from page 1

Believe it or not, this campaign began in 1987, when our first bill was introduced. Thirty years later, LCSWs are finally in the program. We are now waiting for information detailing how to join their panel and how to bill for treatment. We will post the news by e-blast to the entire membership, as well as on chapter listservs and the *Friday E-News*.

Medicaid Reimbursement

Our last objective for reimbursement privilege is New York State Medicaid. A bill allowing LCSWs to directly bill Medicaid, SB 5960/AB 8140, is expected to be delivered to the Governor Cuomo's desk soon. It was introduced by Senator Diane Savino (D-Staten Island) and Assembly member Harry Bronson (D-Rochester). Now is the time to contact the Governor to allow LCSWs to bill Medicaid directly for outpatient office visits.

LCSWs Now Fully Recognized

With or without Medicaid, the LCSW has now been fully and legally recognized as a mental health profession. We have legally established clinical social work as an autonomous profession in New York State and, according the State Supreme Court in 1995, our scope of practice is essentially the same as clinical psychologists. We can legally make assessment-based treatment plans, diagnose and offer treatment in any modality we have been trained for without referral, supervision or consultation.

Across the country, Clinical Social Workers provide the majority of mental health services. We are recognized as clinicians by the for-profit behavioral health care companies, managed care, and federal health insurance programs (Medicare, Champus, FEHBA, etc.), as well as by private insurers.

Success Has Consequences

Of course, our success is accompanied by consequences. Because the masters' degree is the terminal degree in our profession, sibling mental health providers with masters' degrees want the same status that we have. The mental health practitioners, known as the 163 group, (LMFTs, LCATs, LMHCs, LPs) have introduced legislation for mandated insurance reimbursement consistently over the past several years. This year, they have introduced two bills making them eligible for all insurance reimbursement immediately after passing their licensing exam. This, despite the fact that they cannot make a diagnosis (only a diagnostic assessment) and need physician consultation for any patient with a biological mental disorder. In addition, the clinical experience requirements needed to qualify to sit for their licensing exam fall quite short of the LCSW's requirements.

To be specific, the LCSW requires 36 months or 2,000 supervised contact hours with patients delivering psychotherapy services based on assessment-based planning and diagnosis. MHCs, however, need 3,000 hours, of which only 1,500 hours are supervised client contacts; MFTs, likewise, need 1,500 hours of supervised client contacts. Creative Arts therapists are required to have 1,500 hours, of which only 1,000 are patient contact hours. And psychoanalysts are required to have 1,500 hours, of which only half, 750, need to be directly with patients.

In its original form, their insurance bill would have allowed the Mental Health Practitioners to receive insurance reimbursement immediately after passing their licensing exam, while LCSW would need an additional 2000 hours of experience. Because we were the first masters' level profession to win mandated insurance (known as the "R") 35 years ago, our requirements were more stringent.

Through the excellent work of our lobbyists in Albany and particularly, the NYSSCSW membership response, we were able to convince legislators to amend this bill and include LCSWs immediately after being licensed. Those to have the R, demonstrating additional supervised experience, will keep their standing, but new clinicians can no longer qualify. Consequently, there will be no advanced practice endorsement for the public.

The Governor has not addressed this bill yet. If he signs it into law, the R will be unavailable for future clinicians, but LCSWs will be competitive with the other masters' level

Legislative Committee Continued





Marsha Wineburgh was applauded for her fine Legislative Committee work at the Annual Meeting.

professions, the Mental Health Practitioners. Governor Cuomo may veto the bill, which usually occurs for fiscal reasons, because passage means adding over 20,000 providers to the insurance roles. Of course, if the bill is unsuccessful, the 163 group will be back with another bill.

What's Next on the Agenda?

So where do we go from here? In addition to protecting all that we have gained, we will continue to pursue direct Medicaid reimbursement for private practitioners.

And why don't we go for reimbursement parity with psychologists? Now that we have the legal credentials and private sector recognition as reimbursable mental health professionals and, importantly, the Supreme Court decision about the equivalency of our scopes of practice, the time seems appropriate to seek equal reimbursement for mental health services in New York State.

In conclusion, health care policy is a fascinating and essential arena for participation by clinical social work. As they say in real estate, "It's not over 'til the fat lady sings," and as it turns out, in the political world, she doesn't ever sing. In other words, it's never over. We will always need experienced Albany lobbyists to bring our issues to the legislature and a Legislative Committee to keep watch.

NYS MENTAL HEALTH PROFESSIONS	2019 LICENSEES
LCSWs	28,567
LMSWs	30,091
Psychologists	14,584
LMHCs	7,143
Creative Arts Therapists	1,780
LMFTs	1,244
Licensed Psychoanalysts	711
Psychiatric Nurse Practitioners	N/A