



Virginia Society for Clinical Social Work

REPORT

July 11, 2015

To: Virginia Board of Social Work

**“Psychotherapy” in the definition of Clinical Social Work in the VBSW Regulations**

Submitted by: Joseph G. Lynch LCSW, CSOTP

**VBSW Regulations: 18VAC140-20-10. Definitions.**

*“Clinical social work services” include the application of social work principles and methods in performing assessments and diagnoses based on a recognized manual of mental and emotional disorders or recognized system of problem definition, preventive and early intervention services and treatment services, **including but not limited to psychotherapy** and counseling for mental disorders, substance abuse, marriage and family dysfunction, and problems caused by social and psychological stress or health impairment. (Regulations Governing the Practice of Social Work, Virginia Board of Social Work, Title of Regulations: 18 VAC 140-20-10 et seq. Revised Date: September 26, 2013)*

**INTRODUCTION:**

At the meeting of the Regulatory Committee of the Virginia Board of Social Work on June 19, 2015 the Chair (Bernadette Winters) invited NASW VA and VSCSW to submit information to the committee prior to the August 28, 2015 committee meeting on the use of the term "Psychotherapy" in the definition of Clinical Social Work Services in the regulations of the VBSW. This report is in response to that invitation.

**HISTORICAL CONTEXT:**

In order to understand the use of the word “psychotherapy” in the definition of “Clinical Social Work” in the VBSW regulations it is necessary to review briefly the historical context of both:

1. The establishment of licensing of social workers in Virginia and
2. Vendorship- Meaning the authorization by the Code of Virginia for LCSW’s to bill and collect directly from insurance companies for services rendered.

**1. The establishment of licensing of social workers in Virginia**

Chapter 28 Code of Virginia established the Professional Board of the Virginia Board of Social Work in 1976. The VBSW was one of three Professional Boards that sent representatives to form the Virginia Board of Behavioral Sciences. The two other Professional Boards were the Virginia Board of Psychology and the Virginia Board of Professional Counselors. These boards were housed in the Department of Profession and Occupation Regulation (DPOR). At some point in the early 1980’s the boards were moved to the Department of Health Professions as independent health regulatory boards.

In 1976 LCSW’s were not authorized by the Code of Virginia to directly submit billing to insurance companies for the delivery of psychotherapy services. The LCSW needed to establish a relationship with a physician – usually a psychiatrist- in which the physician would “sign-off” for the services delivered by the LCSW. The physician was paid a fee by the LCSW for this service. Some characterized this fee as a “kickback.”

LCSW's advocated for the right to bill insurance companies directly for the psychotherapy services they delivered. In 1982 the Virginia Chapter of NASW formed the Committee to Achieve Parity (CAP) that was co-chaired by Joseph G. Lynch LCSW and Dr. Titus Bender LCSW. Over a five year period NASW VA advocacy efforts were successful and House Bill 1078 was passed in the 1987 Virginia General Assembly session specifically naming Clinical Social Workers as non-physician practitioners who were to be directly paid by insurance companies for the services they delivered.

See attached

1. NASW VA Resolution of Appreciation and
2. The Code of Virginia §38.2-4221

This legislation enabled LCSW's to bill for the services they provided. However there was substantial resistance from the insurance industry. One of the ways that insurance companies resisted was to deny coverage of a claim based on the rationale that the policy contained language that said they would cover "psychotherapy" and the insurance company noted that the regulations of the VBSW did not specify that "psychotherapy" was included in the Scope of Practice of Clinical Social Workers.

LCSW's continued to advocate for the insurance company to cover claims submitted by LCSW's. This advocacy was again successful in that the VBSW revised their regulations with the effective date April 4, 2001 to have the word "psychotherapy" added to the definition of "Clinical Social Work" for the first time. \*

\*The regulations have been revised 23 times since 1980. No version of the VBSW regulations prior to 2001 contained the word "psychotherapy" in the definitions section of the regulations. Just prior to 2001 the regulations were revised in 1997 and did not contain the word "psychotherapy."

## **DEFINITIONS OF CLINICAL SOCIAL WORK:**

The definition of "Clinical Social Work" has been developed by:

- Social Work Regulatory bodies
- Clinical Social Work practitioners & Professional Associations and
- Social Work academic faculty through publication of social work literature,

There is not uniform agreement on the definition of Clinical Social Work but there is substantial similarity among the definitions developed by the three different groups. Below is a review of some of the definitions from the groups.

### **1. ASSOCIATION OF SOCIAL WORK BOARDS**

The Association of Social Work Boards is a critical member of the Social Work Regulatory community: *The Association of Social Work Boards (ASWB) is the nonprofit organization composed of and owned by the social work regulatory boards and colleges of 49 U.S. states, the District of Columbia, the U.S. Virgin Islands, and all 10 Canadian provinces.... Our mission is to strengthen protection of the public by providing support and services to our member boards. ASWB owns and maintains the social work licensing examinations that are used to test a social worker's competence to practice ethically and safely...The association developed and maintains a **model practice act** that offers regulatory bodies a resource for developing their own laws and regulations...* -

Bold and underline added -<https://www.aswb.org/about/>

---

The ASWB model practice act defines the Practice of Clinical Social Work as follows:

***Section 106. Practice of Clinical Social Work.***

*The practice of Clinical Social Work is a specialty within the practice of Master's Social Work and requires the application of social work theory, knowledge, methods, ethics, and the professional use of self to restore or enhance social, psychosocial, or biopsychosocial functioning of individuals, couples, families, groups, organizations and communities. The practice of Clinical Social Work requires the application of specialized clinical knowledge and advanced clinical skills in the areas of assessment, diagnosis and treatment of mental, emotional, and behavioral disorders, conditions and addictions. Treatment methods include the provision of individual, marital, couple, family and group counseling and **psychotherapy**. The practice of Clinical Social Work may include private practice and the provision of clinical supervision.*

(ASSWB Model Social Work Practice Act-page 6- bold and underline added)

ASWB provides exams for five levels of licensure based on the Practice Analysis. The exam categories are:

***Associate***—A few jurisdictions administer the Bachelors Examination to candidates who do not have degrees in social work for an Associate license. A lower passing score is used.

***Bachelors***—The examination intended for use by individuals with a baccalaureate degree in social work.

***Masters***—The examination that is intended for individuals who hold an MSW degree, but who do not have post-degree supervision.

***Advanced Generalist***—The Advanced Generalist exam is designed for advanced practitioners who do more macro-level, generalist, administrative or management work. It is one of two exams intended to be taken by social workers with an MSW or higher degree, plus the required postgraduate supervised experience.

***Clinical***—The Clinical exam has more emphasis on the provision of direct, micro-level mental health services. It is the second of two exams (along with the Advanced Generalist) intended to be taken by social workers with an MSW or higher degree, plus the required postgraduate supervised experience. The Advanced Generalist and clinical examinations are considered on par due to the advanced level of practice knowledge and experience expected of someone taking either exam. But they each emphasize different areas of practice as noted in their descriptions.

ASWB has compiled the *Social Work Laws & Regulations Comparison Guide* that provides information on each social work regulatory board's requirements for licensure (See attached). Of the 63 social work regulatory boards listed 45 include the word "Clinical" in the title of the license and if the word "Clinical" is in the title then the applicant must take the Clinical exam. Of the remaining boards 4 use the title "Certified" and 5 use the title "Independent" and require the Clinical exam. Some boards use combinations of Clinical, Independent and Certified. The title "Licensed Masters Social Worker" appears in the regulations of 26 boards and 21 of those require the applicant to take the "Masters" exam.

## **2. NATIONAL ASSOCIATION OF SOCIAL WORKERS (NASW)**

*The National Association of Social Workers (NASW) is the largest membership organization of professional social workers in the world, with 132,000 members. NASW works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies. <http://www.socialworkers.org/nasw/default.asp>*

One of the standards developed by NASW is “NASW Standards for Clinical Social Work in Social Work Practice.” In the “Introduction” section it notes “psychotherapy” as part of the definition of Clinical Social Work:

### **INTRODUCTION**

*Clinical social workers represent the largest group of behavioral health practitioners in the nation. They are often the first to diagnose and treat people with mental disorders and various emotional and behavioral disturbances. Clinical social workers are essential to a variety of client-centered settings, including community mental health centers, hospitals, substance use treatment and recovery programs, schools, primary health care, centers, child welfare agencies, aging services, employee assistance programs, and private practice settings.*

*Clinical social work has a primary focus on the mental, emotional, and behavioral well-being of individuals, couples, families, and groups. It centers on a holistic approach to **psychotherapy** and the client’s relationship to his or her environment. Clinical social work views the client’s relationship with his or her environment as essential to treatment planning. Clinical social work is a state-regulated professional practice. It is guided by state laws and regulations.*

*[https://www.socialworkers.org/practice/standards/clinical\\_sw.asp](https://www.socialworkers.org/practice/standards/clinical_sw.asp)*

## **3. THE AMERICAN BOARD OF EXAMINERS IN CLINICAL SOCIAL WORK (ABE)**

*The American Board of Examiners in Clinical Social Work (ABE), founded in 1987, is a national certification board created by and for the profession of Clinical Social Work. It is the credentialing unit of the Center for Clinical Social Work, a national education and advocacy organization.*

### ***Clinical Social Work Described***

*The flexible and skillful application of knowledge, theories, and methods in a bio-psychosocial approach is a hallmark of clinical social work. Interventions—the direct person-to-person(s) process—are conducted with people of all ages and range in nature from preventive, crisis, and psycho-educational services to collaborative client advocacy and brief and long-term counseling or **psychotherapy**. Typically, clinical social workers supervise and consult with professional colleagues and may engage in indirect practice (e.g. administration, research, teaching, writing). It is a standard of practice for clinical social workers to engage in career-long continuing clinical education and to adhere to a professional code of ethics.*

*<https://www.abecsw.org/about-abe.html>*

---

**SUMMARY:**

From the information above it is clear that:

- The national professional associations of NASW, the ASWB and ABE all include the word “psychotherapy” in their definition or description of Clinical Social Work.
- That the history of the development of Clinical Social Work licensure and vendorship in Virginia to include the word “psychotherapy” in the definition of Clinical Social Work was hard fought for by advocacy of NASW VA and by individual Clinical Social Workers.
- That the word “psychotherapy” being in the definition of Clinical Social Work in the VBSW regulations gives legal justification to psychotherapy being within the “Scope of Practice” of Clinical Social Work and thus allows for LCSW’s to bill insurance companies directly for the services they provide and to earn an income.

For all of these reasons the Virginia Society for Clinical Social Work strongly encourages the Virginia Board of Social Work to take no actions that in any way change the definition of Clinical Social Work in the VBSW regulations concerning the word “psychotherapy.”

---