

## Background

In May 2020, the California Department of Health Care Services (DHCS) announced through a [COVID-19 News Flash](#) that the administration temporarily added services of Associate Clinical Social Workers (ASWs) and Associate Marriage and Family Therapists (AMFTs) at Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs) as a billable visit through (and pursuant to) [State Plan Amendment 20-0024](#). ASW or AMFT services that meet visit criteria and are provided after March 1, 2020, are eligible for reimbursement at the Prospective Payment System (PPS) rate so long as the claim is submitted by a supervising billable provider. This temporary change remains in effect through the end of the COVID-19 public health emergency, including any extensions. On January 30, 2023, The White House announced that the [COVID Public Health Emergency will end](#) on May 11, 2023.

There have been many challenges alleviated for health centers by including ASWs and AMFTs into care teams. Community health centers (CHCs) were able find solutions in the behavioral health workforce shortage, such as filling open vacancies that have been difficult to recruit for, hiring bilingual providers, and improving the CHC workforce pipeline by allowing these providers to earn their licensing hours within the health center. CHCs were also able to ease the competition with other higher paying institutions and were granted access to more quick hires as licensed hires could take months to onboard. The flexibility increased access to more behavioral health services and helped health centers respond to the increased patient demand for behavioral health services. Additionally, the flexibility has helped meet the needs of health center communities by providing culturally and linguistically competent care, in addition to hiring staff that are ethnically and racially reflective of the populations they serve.

CaliforniaHealth+ Advocates worked with Senator Monique Limón and our cosponsors at the California Association of Marriage and Family Therapists (CAMFT) to introduce [Senate Bill 966](#), which would allow health centers to continue to use ASWs and AMFTs after the public health emergency. Thanks to the persistent advocacy efforts by CHCs and the support by the legislature, Governor Newsom signed SB 966 into law on September 27, 2022. DHCS submitted [State Plan Amendment 22-0014-A](#), which the Centers for Medicare and Medicaid Services (CMS) approved effective March 14, 2023, making ASWs and AMFTs a permanent billing option for FQHCs and RHCs. Moving forward, health centers must refer to the provider manual for instructions on how to bill and receive reimbursement for services rendered by ASWs and AMFTs. The [FQHC/RHC Provider Manual](#) was updated in January 2023 to add ASWs and AMFTs Covered Services (page 3) and also lists out the conditions for FQHCs and RHCs to seek reimbursement for services rendered by ASWs and AMFTs (page 8).

Please reach out to Peter Dy ([pdy@cpca.org](mailto:pdy@cpca.org)) for any additional questions or comments.

## Frequently Asked Questions

### 1. How does a health center bill for the services for ASWs and AMFTs?

Services are billed under the licensed billable behavioral practitioner of the FQHC or RHC. The California Board of Behavioral Sciences (BBS) does not recognize ASWs and AMFTs as licensed practitioners. Therefore, licensed behavioral health practitioners must supervise and assume the professional liability of services by the unlicensed ASW or AMFT practitioner. The licensed practitioner must also comply with supervision requirements established by the BBS.

In a [Medi-Cal News Update](#), updated reimbursement criteria for ASW and AMFT services are billed under the National Provider Identification (NPI) of the licensed billable behavioral practitioner supervising the ASW or AMFT.

### 2. Who can supervise an ASW or AMFT?

The Board and Behavioral Sciences lists the same licensed practitioners that can supervise ASWs and AMFTs:

- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Social Worker (LCSW)
- Licensed Professional Clinical Counselor (LPCC)

- Licensed Educational Psychologist (LEP)
- Licensed Clinical Psychologist
- Licensed Physician and Surgeon certified in Psychiatry by the American Board of Psychiatry and Neurology

Please note that the supervising practitioner must also be a **billable behavioral practitioner** of the FQHC or RHC to be eligible for reimbursement at the PPS rate. For this reason, LPCCs who supervise an ASW or ACSW will not be able to bill for rendered services since they are not a PPS-billable provider.

(Source: [ASW Supervision Information](#) and [AMFT Supervision Information](#))

**3. My health center doesn't have a site that includes LMFTs in the PPS rate. Can a LMFT supervise an ASW or AMFT and still bill for services?**

No. The services rendered by ASWs and AMFTs must be billed by the supervising licensed provider. To the extent that your health center doesn't have a supervising licensed professional on staff who is a billable provider, the clinic would need to add a qualifying provider type to serve as the supervisor to bill under as required by current policy. If that provider type is a LMFT, a change in scope is required.

**4. Is a Change in Scope of Service Request (CSOSR) required to begin billing for ASWs and AMFTs?**

No. During the public health emergency, health centers did not have to undergo a scope change to begin billing and receiving reimbursement at the PPS rate for services furnished by ASWs and AMFTs. This same provision was made permanent as DHCS did not include in SPA 22-0014-A or the FQHC/RHC Provider Manual the requirement to file a CSOSR to begin billing for ASWs and AMFTs.

Once the AMFT is licensed as a LMFT, a scope change would be required in order to bill services rendered by the newly licensed LMFT (LMFTs may not bill under another supervising provider). Additionally, if billing ASW or AMFT services under a LMFT who is not already in the site's rate, a scope change would be required.

**5. An AMFT does not require a change in scope, but once they are fully licensed as a LMFT, there will be a required scope change?**

Yes, unless the health center chooses not to continue billing under the newly licensed provider. If continuing to bill for services rendered by the new LMFT, a change scope requirement is triggered. [AB 1863 \(Wood\)](#) signed by Governor Brown on September 25, 2016, includes LMFTs as a billable provider type at a FQHC and RHC, but requires FQHCs and RHCs to file a CSOSR in order to bill for LMFT services.

**6. Will virtual supervision be allowed for ASWs and AMFTs?**

Yes. [AB 1758 \(Aguiar-Curry\)](#) allows supervision via two-way, real-time videoconferencing between a supervisor and a supervisee in all settings. This will impact providers licensed under the BBS, so marriage & family therapists, clinical social workers, and professional clinical counselors. An important note about this bill is that there is a sunset date of January 1, 2026. You can find more information in the [BBS AB 1758 FAQs](#).

**7. Does the supervising provider need to participate in the visit in order to bill?**

No. ASWs and AMFTs are billing under the license of the supervising provider and signing the note. ASWs and AMFTs must be getting clinical supervision from their supervising provider.

**8. What is the maximum number of ASWs and AMFTs a Licensed Clinical Social Worker can supervise and where can I find other supervision requirements?**

Six. Per BBS: "Supervisors of supervisees in a nonexempt setting shall not serve as individual or triadic supervisors for more than six supervisees at any time. Supervisees may be registered as associate marriage and family therapists, associate professional clinical counselors, associate clinical social workers, or any combination of those registrations."

BBS publishes a document annually that outlines the statutes and regulations relating to the practice of Clinical Social Work and Marriage & Family Therapy. The most recent iteration is the [2023 Statutes and Regulations](#).