State Beat: Medicaid victories for psychologists and beneficiaries in Nevada and New Jersey

Psychologists successfully advocate for greater access to psychological and other mental health services.

By Hannah Calkins

Medicaid beneficiaries in Nevada and New Jersey will now have greater access to psychological and other mental health services, thanks to the efforts of psychologists and psychology advocates.

In September, the agency that administers Nevada’s Medicaid program reversed an earlier decision to require prior authorizations for most mental health services.

Adrianna Wechsler Zimring, EdM, PhD, said that a “huge, grassroots” outpouring of organized concern from psychologists, other mental health providers and community members prompted the agency to scale back and then ultimately reverse the initial decision, which came as an abrupt surprise over the summer.

“We are so fortunate to see what we can accomplish when we work together,” said Zimring, who is past-president of the Nevada Psychological Association and current chair of its legislative committee.

In New Jersey, the state’s Medicaid agency “[provided] clarification” in a July 2018 newsletter that certain clinics could bill Medicaid for services provided by appropriately supervised trainees, including psychology interns.

Since the policy clarification was published as an update to the agency’s administrative procedures, it didn’t need to go through the legislative process, according to Judith Glassgold, PhD, director of professional affairs at the New Jersey Psychological Association (NJPA), and Keira Boertzel-Smith, JD, NJPA’s executive director.
This change is the result of a series of conversations between Glassgold, Boertzel-Smith and the state’s Medicaid administrators, with assistance from APA attorneys Caroline Bergner, JD, and Brad Steinbrecher, JD. According to Bergner, the formal conversation with Medicaid began last year, but APA and NJPA have been working on this issue since 2015.

Glassgold said the Medicaid administrators were open to the idea of psychology trainees providing services; they just needed to be educated about the length and rigor of their training.

“In our meetings, we were able to share ideas about expanding their workforce so more vulnerable patients who need services can get them,” she said, noting that the state’s Medicaid expansion, in addition to the pressures of the opioid epidemic, has created a great need for more providers.

This update is a win for beneficiaries, interns and clinics, said Glassgold.

“By billing Medicaid for services provided by interns, clinics can offset the high cost of supervision,” she said. “So, there is greater access for patients, interns have new opportunities for training and the clinic can expand their mental and behavioral health services. Everybody benefits.”

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