

## Why YOU Should Care About MFTs Winning Medicare Coverage

### 1. To Provide Urgently Needed Mental Health Services.

Today, MFTs are not covered by Medicare. This results in fewer providers who are able to respond to the mental health care needs of the elderly and disabled. With our senior population growing, MFTs are potentially excluded from a provider eligibility that encompasses an increasingly large segment of the population. Statistics show major unmet needs across the country, especially in rural and inner-city locales. Each person with an unmet mental-health need is a person whose pain could be reduced if they had access to MFT services.

### 2. To Increase Your Income.

Your current ineligibility for Medicare doesn't just eliminate Medicare beneficiaries – 15% of the population – from your potential pool of clients. Because many Medicare beneficiaries are “dually eligible” for MediCal, state Medical programs may be reluctant to cover MFTs, eliminating up to *15% more* of your potential pool of clients. And managed-care plans, which cover *half of Americans*, prefer practitioners to be Medicare eligible, either because the plans have Medicare coverage products or simply because Medicare eligibility is a “Good Housekeeping” seal of approval. Without Medicare eligibility, it is increasingly difficult to have a financially viable private practice.

### 3. To eliminate unfair discrimination against MFTs.

The federal Health Resources and Services Administration defines MFTs as one of the five “core mental health professions,” along with psychiatry, psychology, psychiatric nursing, and social work. Yet MFT is the only one of these professions that is not Medicare eligible, even though MFTs' educational preparation is at least equivalent to that for clinical social work.

### **Doesn't Medicare Pay Poorly and Require Lots of Paperwork?**

If Medicare covered Marriage and Family Therapists, MFTs would be unlikely to get rich from Medicare beneficiaries. However, Medicare generally pays more than MediCal and many private health plans now peg their payment rates to those of Medicare. In addition, although a few Medicare beneficiaries may be willing to pay some funds out-of-pocket, these amounts likely are less than what Medicare would allow as payment.

The paperwork and other rules required by Medicare are comparable to those for major private health plans. It is true that such rules are more extensive than simply sending bills to self-pay clients. But approximately 80% of your potential clients have third-party coverage, so it is increasingly difficult to convince them to pay your entire bill out-of-pocket when they can get up to 100% insurance coverage for the charges of other mental health practitioners.

### **What YOU Can Do TODAY**

Go to [http://www.aamft.org/Advocacy/index\\_m.asp](http://www.aamft.org/Advocacy/index_m.asp). Click on either the “Medicare MFT – Call Now” (to call your Congressional Delegation) or “Medicare MFT – Email Now” (to email your Delegation) and follow the directions. Calling takes only a few minutes, while emailing can be done in one minute. Do this today to help your clients, your profession, and yourself.