

**The Implications of Healthcare Reform for the Social Work Profession
United States House of Representatives Congressional Briefing**

Wednesday, February 16, 2011

**Remarks By:
Asua Ofosu, JD
Manager, Government Relations
National Association of Social Workers
750 First Street NE, Suite 700
Washington, DC 20002-4241
(202) 336-8237
aofosu@naswdc.org**

Good morning. I am Asua Ofosu, Manager of the Government Relations Department of the National Association of Social Workers. We want to thank Representative Towns for holding this important briefing and for consistently advocating for the social work profession. I am pleased to offer remarks regarding the implications of healthcare reform on the social work profession that will focus on health disparities, and mental and behavioral health.

All Americans, regardless of race or ethnicity, deserve quality health care services when they need them. When the provisions of the Affordable Care Act (ACA) are fully implemented by 2014, approximately 32 million Americans, who currently do not have health insurance coverage, will be covered, and coverage will be more affordable for many millions more. The ACA makes vital improvements to health care access, quality, and services for millions of Americans with health and behavioral health needs.

Social workers practice as part of health care teams, and are specifically trained to address the psychosocial implications of acute and chronic illnesses. They practice across the continuum of care including community and public health clinics, hospitals, nursing homes, home health care, primary care, veteran service networks, and hospices. The new law contains key provisions that address critical changes social workers believe are needed to improve the public's health, and to start moving towards a system that focuses on keeping people healthy and one that is affordable for all.

Health Disparities

An essential component of eradicating health inequities is addressing the social determinants of health. Social determinants include a person's socioeconomic status, neighborhood, employment conditions, access to health care and personal behaviors. Those social determinants coupled with the lack of insurance coverage for minority and poor populations prevent vulnerable individuals from receiving appropriate health care. In addition, stigmatizing practices in health care delivery, a lack of racial and ethnic diversity, and cultural competence among health care providers lowers the quality of health services for racial and ethnic minority groups. Even after adjustments for socioeconomic characteristics and other access-related factors are considered, differences in health literacy between groups, and the failure to include minority populations in medical research also contributes to a lower quality of health services.

A December 2010 report, *Easing the Burden Using Health Care Reform to Address Racial and Ethnic Disparities in Health Care for the Chronically Ill*, by the Center for American

Progress (CAP), stated that chronically ill Americans from racial and ethnic minorities have much to gain from the implementation of the ACA.

In order to make the health care system sustainable into the future, we must recognize that most chronic diseases can be prevented. The CAP report also states, “[T]he total annual cost of racial and ethnic health disparities, including direct medical costs and indirect costs such as lost productivity, lost wages, absenteeism, family leave, and premature death, is of the order of \$415 billion”. Improving access to prevention services, in combination with better management and coordination of care, is an investment that pays off with better health outcomes and more productive lives at lower cost.

Social workers in communities across the country are actively participating in the day to day efforts to ensure that vulnerable populations have access to, and receive, quality health care.

Mental and Behavioral Health

The new health care law requires health plan benefits to include mandatory mental health, substance use, rehabilitation, prescription drugs, and preventive services. In addition, plans sold in the new insurance exchanges will include mental health and substance use benefits at parity levels. Further, starting in 2014, substance abuse or mental illness can no longer be used by insurers to deny coverage as a pre-existing condition. The many reforms to the ACA will make health care more accessible and affordable for people with mental and behavioral health challenges. Many times social workers are often the only mental health care provider in rural and underserved areas.

Social Work Workforce

Along with the important health provisions that benefit individuals social workers serve, the ACA ensures that social workers are included in the health care model. The ACA includes initiatives to increase the diversity of the workforce by providing scholarships and financial assistance to disadvantaged students who commit to work in medically underserved areas and who serve as faculty in eligible institutions. Further, increasing the number of underrepresented groups in the health professions can help address health care disparities by both improving access and responding more effectively to the needs of minority populations.

The health care workforce also is strengthened by addressing the education and training needs of social workers. Workforce development programs in mental health and behavioral health education will assist social work students specializing in, and providing services to, special high needs populations such as children, the aged and underserved minority populations.

In conclusion, I want to mention a piece of legislation that NASW and the social work community are actively supporting, the Dorothy I. Height and Whitney M. Young, Jr. Social Work Reinvestment Act. The bill will provide the foundation we need to recruit and retain the social workers of the future who serve so many of our citizens. With the passage of the ACA and the continued advocacy for the passage of the social work reinvestment act, the profession of social work is well positioned to address the workforce needs to fully assist those who benefit from the ACA. Representative Towns and Senator Mikulski plan on reintroducing the Social Work Reinvestment Act this Congress.

On behalf of Dr. Elizabeth Clark, NASW Executive Director, and the 145,000 members of NASW, thank you for this opportunity. We look forward to working with you and other members of Congress as the ACA is implemented.