



THE STATE
of **ALASKA**
GOVERNOR BILL WALKER

**Department of
Health and Social Services**

DIVISION OF BEHAVIORAL HEALTH

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March 22, 2018

The Honorable Ivy Spohnholz
House of Representatives
Alaska State Capitol, Room 421
Juneau, AK 99801

Dear Representative Spohnholz:

This letter is in response to a request from your office for information regarding changes to House Bill 353, the bill related to the licensure of Marital & Family Therapists.

HB 353, version A, proposes to:

- (1) change the licensure requirements for Marital and Family Therapists (LMFTs) to include:
 - a) new supervision requirements for individuals seeking to obtain a MFT license (Sec. 1, pg. 2, Lines 17 - 28); and
 - b) a list of licensed professionals who would be authorized to provide the 100 hours of group supervision required of MFT licensees (Sec. 2, pg. 2 Lines 30 and 31; pg. 3, Lines 1 - 15);
- (2) add MFT services as a new optional Medicaid service under AS 47.07.030(b), which would allow LMFTs to enroll in Medicaid and become independent behavioral health service providers able to directly bill Medicaid when clients have Medicaid as their health insurance (Sec. 3, Pg. 3, Line 28); and
- (3) include in AS 47.07.030 new paragraphs that
 - a) define a Mental Health Physician Clinic (MHPC) and outlines the requirements for supervising a MHPC by a psychiatrist (Sec. 4, pg.4, Lines 6 - 13); and
 - b) describe the criteria for Medicaid reimbursement of a MHPC (Sec. 5, pg.4, Lines 15 - 29).

Sections 4 and 5 of the HB 353 add new paragraphs to AS 47.07.030 that provide definitions and clarifying reimbursement rules for mental health physician clinics, where some LMFTs may choose to work. The intent of these new paragraphs is already found in regulation (7 AAC 135.030) and is not necessary for the other changes in the bill related to the licensure of Marriage & Family Therapists to go into effect.

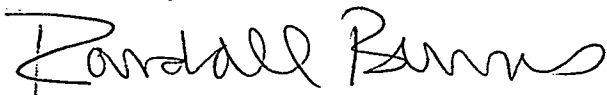
As a result, the Department has suggested removing Sections 4 and 5 from HB 353 because another bill under consideration by the Legislature, CSSB 169(HSS), sponsored by Senator Giessel, likewise makes changes to AS 47.07.030 that will also provide clarifying definitions and reimbursement rules for clinics providing mental health/behavioral health services. By removing Sections 4 and 5 from HB 353, you would eliminate any conflicts between the definitions and intent of CSSB 169(HSS) and the current language of HB 353.

The Department has a longstanding intent to make changes to its regulations that address these same issues affecting clinic supervision, including removing both the requirement that a clinic be supervised solely by a psychiatrist and that a clinic supervisor must work on site at his/her clinic 30% of the time. The Department, having filed its application to the Centers for Medicare and Medicaid Services for approval of an 1115 Behavioral Health Waiver Demonstration, will, in the near future, submit these regulation changes for adoption.

Because of these specific, forthcoming regulatory amendments which comport with the intent of HB 353, as well as other changes under consideration for the State's broader behavioral health system, the Department does not recommend retaining the language in Sections 4 and 5 of HB 353 at this time.

Please do not hesitate to contact me, should you have any further questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Randall Burns". The signature is fluid and cursive, with the first name "Randall" being more prominent than the last name "Burns".

Randall Burns
Director
Division of Behavioral Health



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Department of Commerce, Community,
and Economic Development

BOARD OF MARITAL AND FAMILY THERAPY

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March 20th, 2018

The Alaska State Board of Marital and Family Therapy held a teleconference meeting to discuss Senate Bill 105 and House Bill 353 on March 5th, 2018. The Board unanimously affirmed their support for statutory changes as outlined below.

1. Alaska Statute(AS) 08.63.100(a):
 - a. This amendment **calls for clarification** that the hours required for licensure are 1,700 total hours - 1,500 clinical contact hours and 200 hours of supervision. The supervision hours must include 100 hours of individual supervision and 100 hours of group supervision.
 - b. This amendment further **deletes** the proposed requirement for LMFT's to carry liability insurance. The Board discussed that the intention was to make professional liability insurance available in the case that if an LMFT was under investigation, they would be responsible for those costs individually. Unfortunately, it was discovered that professional liability insurance is not available as desired to offset any investigative costs.
2. AS 08.63.120(b):
 - a. This amendment allows professionals from certain other mental health disciplines to serve as clinical supervisors for group supervision only.
 - b. The amendment further removes Advanced Nurse Practitioners as candidates for clinical supervisors.
3. AS 47.07.030(b)
 - a. The Board fully supports the inclusion of Marital and Family Therapy Services in the list of services available for Medicaid reimbursement.
4. AS 47.07.030(g)
 - a. This amendment defines "direct supervision" and the Board fully supports removing the requirement for a psychiatrist to be on site at least 30% of the time, and replacing it with language defining direct supervision as psychiatric oversight in person or via a communication device.
5. The Board of Marital and Family Therapy supports sections stating that we may adopt regulations in relation to the changes made under this bill. We further support proposed effective dates.

We truly appreciate your continued support of our profession. As members of the Board, we work hard towards making Marital and Family Therapy available to families in need. Marital and Family Therapists are highly trained mental health professionals, specially trained in the dynamics of systems, which allows us to diagnose and treat individuals, couples, and families. Continuing research shows that a strong social connection (the bread and butter of Marital and Family Therapy) leads to a quantifiable decrease in depression and anxiety, increased reported quality of life, greater heart health, increased immune function, and even a longer life span. Again, we thank you for your continued support.

Sincerely,

The Alaska State Board of Marital and Family Therapy