

ALASKA LEGISLATURE COMMITTEE FILES 1991-1992 8672

6801 HOUSE HEALTH EDUCATION & SOCIAL SERVICES

HB

18

STATE OF ALASKA
THE LEGISLATURE

POUCH Y - STATE CAPITOL
JUNEAU, ALASKA 99811
907-465-3800

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Copies of minutes listed below were originally included in this file. The minutes are available on the STAIRS database CMPR. In order to save space copies of minutes have not been left in the files.

Mary Van Nimwegen

2/17/91 NHSS

HOUSE COMMITTEE REPORT

(7)

Date Referred: January 21, 1991

FURTHER REFERRALS: Judiciary
Finance

Date of Committee Action: 2-19-91

The HEALTH, EDUCATION & SOCIAL SERVICES Committee considered: HB 18

HOUSE BILL NO. 18

MARRIAGE & FAMILY THERAPISTS

"An Act regulating the practice of marital and family therapy; amending Alaska Rule of Evidence 504(a)(3); and providing for an effective date."

RECOMMENDATIONS:

be replaced with CS HB 18 (HES) [] the same title
[x] a new title

[] have attached amendments(s)

[x] do pass

[] do not pass

[] no recommendations

[] individual recommendations

[] additional referral to the _____ Committee

ADOPTS: _____ letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept)

APPROVES PREVIOUS: (Dept/Date)

[x] fiscal impact Commerce + Economic. Dep.

[] fiscal note(s) _____

[] zero fiscal note _____

[] zero fiscal note(s) _____

SIGNING DO PASS:

SIGNING OTHER RECOMMENDATIONS:

	Check appropriate column:	Do Not Pass	No Rec	Amend
<i>Robert E. Carney</i> CARNEY				
<i>Georgia L. Miller</i>				
<i>Mary Miller</i>				
<i>Mark Stanley</i>				

Georgia L. Miller
CO - Chairman's Signature

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. HB 18

Revision Date: _____ Department Affected: Commerce & Economic Dev.
 Title: Regulating the practice of BRU: Occupational Licensing
marital and family therapy; Component: Administration
 Sponsor: Reps. Gruenberg and Carney
 Requestor: House HESS COMPONENT SERIAL NO.

0	3	5	6
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES	3.6	3.6	3.6	3.6	3.6	3.6
TRAVEL	19.7	16.5	11.6	11.6	11.6	11.6
CONTRACTUAL	10.7	10.7	10.7	10.7	10.7	10.7
SUPPLIES	1.0	1.0	1.0	1.0	1.0	1.0
EQUIPMENT	0	0	0	0	0	0
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	35.0	31.8	26.9	26.9	26.9	26.9

CAPITAL	0	0	0	0	0	0
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REVENUE	12.0	0	12.0	0	12.0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND	23.0	31.8	14.9	26.9	14.9	26.9
FEDERAL FUNDS	0	0	0	0	0	0
OTHER GF/PR	12.0	0	12.0	0	12.0	0
TOTAL	35.0	31.8	26.9	26.9	26.9	26.9

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.) HB 18 establishes a five-member Board of Marital and Family Therapy to establish examination, training and education requirements for entry into the profession, and to issue licenses to qualified individuals. Information on file indicates there are approximately 40 practitioners who would be affected by this legislation upon passage.

Prepared By: Jennifer Strickler, Administrative Officer Phone: 465-2144
 Division: Occupational Licensing Date: February 1, 1991
 Approved by Commissioner: Glenn A. Olds
 Agency: Department of Commerce & Economic Development Date: February 1, 1991

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

CONTINUATION OF FISCAL NOTE ANALYSIS - HB 18

This fiscal note represents the cost of licensing marital and family therapists with a five-member board and an estimate of 40 practitioners who would seek and qualify for licensure. Costs of the program are projected based on the number of licensees and mandates in the bill. Therefore, costs associated with the marital and family therapy licensing program are projected as follows:

Personal Services: \$ 3.6

To provide administrative staff support.

Travel: \$ 19.7

In FY 92, this funding will provide for four face-to-face meetings, two in Anchorage and two in Juneau, assuming two members are from the Anchorage area, two from Juneau, one from Fairbanks; and three division staff (Director, Licensing Examiner, and Regulations Specialist) to attend each meeting.

In FY 93, funding provides for three board meetings and travel to administer the licensing examination in various locations throughout the State. (\$16.5)

In FY 94 forward, the licensing program will have been in operation for two years, and therefore, require fewer meetings to conduct its business. The number of board meetings is reduced to two meetings each year. This funding also provides for travel to administer the licensing examination in various locations. (\$11.6)

Contractual: \$ 10.7

This funding provides for printing, advertising, postage and communication costs.

Supplies: \$ 1.0

Funding will provide standard office supplies.

Grand Total: \$ 35.0

REVENUE:

The revenues are based on 40 practitioners paying a licensing fee of \$150 per year. Because licenses are issued on a biennial cycle, revenues are doubled every other year. As indicated, 40 practitioners will not support a licensing program with a five-member board unless licensees are willing to pay incredibly high annual licensing fees. As an alternative, the licensing program may have to be supplemented by general funds or fees from other licensing areas.

AS 08.01.065(c), Fees established by regulation provide that the "department may establish a fee that is less than the cost of the activity for which the fee is charged if the department determines that it is not reasonable to impose the full cost of the activity on the applicant or licensee."

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. HB 18

Revision Date: February 6, 1991

Department Affected: Commerce & Economic Dvlp.

Title: Regulating the practice of marital and family therapy;....

BRU: Occupational Licensing

Component: Administration

Sponsor: Reps. Gruenberg and Carney

Requestor: House HESS

COMPONENT SERIAL NO.

0	3	5	6
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES	3.6	3.6	3.6	3.6	3.6	3.6
TRAVEL	19.7	16.5	11.6	11.6	11.6	11.6
CONTRACTUAL	10.7	10.7	10.7	10.7	10.7	10.7
SUPPLIES	1.0	1.0	1.0	1.0	1.0	1.0
EQUIPMENT	0	0	0	0	0	0
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	35.0	31.8	26.9	26.9	26.9	26.9

CAPITAL	0	0	0	0	0	0
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REVENUE	24.0	0	24.0	0	24.0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND	11.0	31.8	2.9	26.9	2.9	26.9
FEDERAL FUNDS	0	0	0	0	0	0
OTHER GF/PR	24.0	0	24.0	0	24.0	0
TOTAL	35.0	31.8	26.9	26.9	26.9	26.9

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.) HB 18 establishes a five-member Board of Marital and Family Therapy to establish examination, training and education requirements for entry into the profession, and to issue licenses to qualified individuals. Information on file indicates there are approximately 40 practitioners who would be affected by this legislation upon passage.

Prepared By: Barbara Gabier, Licensing Supervisor Phone: 465-3262

Division: Occupational Licensing Date: February 6, 1991

Approved by Commissioner: Glenn A. Olds

Agency: Department of Commerce & Economic Development Date: February 6, 1991

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

CONTINUATION OF FISCAL NOTE ANALYSIS - HB 18

This fiscal note represents the cost of licensing marital and family therapists with a five-member board and an estimate of 40 practitioners who would seek and qualify for licensure. Costs of the program are projected based on the number of licensees and mandates in the bill. Therefore, costs associated with the marital and family therapy licensing program are projected as follows:

Personal Services: \$ 3.6

To provide administrative staff support.

Travel: \$ 19.7

In FY 92, this funding will provide for four face-to-face meetings, two in Anchorage and two in Juneau, assuming two members are from the Anchorage area, two from Juneau, one from Fairbanks; and three division staff (Director, Licensing Examiner, and Regulations Specialist) to attend each meeting.

In FY 93, funding provides for three board meetings and travel to administer the licensing examination in various locations throughout the State. (\$16.5)

In FY 94 forward, the licensing program will have been in operation for two years, and therefore, require fewer meetings to conduct its business. The number of board meetings is reduced to two meetings each year. This funding also provides for travel to administer the licensing examination in various locations. (\$11.6)

Contractual: \$ 10.7

This funding provides for printing, advertising, postage and communication costs.

Supplies: \$ 1.0

Funding will provide standard office supplies.

Grand Total: \$ 35.0

REVENUE:

The revenues are based on 40 practitioners paying a licensing fee of \$300 per year. Because licenses are issued on a biennial cycle, revenues are doubled every other year. As indicated, 40 practitioners will not support a licensing program with a five-member board unless licensees are willing to pay incredibly high annual licensing fees. As an alternative, the licensing program may have to be supplemented by general funds or fees from other licensing areas.

AS 08.01.065(c), Fees established by regulation provide that the "department may establish a fee that is less than the cost of the activity for which the fee is charged if the department determines that it is not reasonable to impose the full cost of the activity on the applicant or licensee."

CS FOR HOUSE BILL NO. 18 (HES)
IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - FIRST SESSION

BY THE HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES COMMITTEE

Offered:
Referred:

Sponsor(s): REPRESENTATIVES GRUENBERG, Carney

A BILL

FOR AN ACT ENTITLED

1 "An Act regulating the practice of marital and family therapy; and amending Alaska Rule
2 of Evidence 504(a)(3)."

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

4 * Section 1. AS 08 is amended by adding a new chapter to read:

5 CHAPTER 63. MARITAL AND FAMILY THERAPY.

6 ARTICLE 1. BOARD OF MARITAL AND FAMILY THERAPY.

7 Sec. 08.63.010. BOARD ESTABLISHED. (a) There is established the Board of Marital
8 and Family Therapy.

9 (b) The board consists of three persons licensed under this chapter and two members of
10 the public.

11 Sec. 08.63.020. BOARD APPOINTMENTS. The governor shall appoint the members
12 of the board subject to confirmation by the legislature.

13 Sec. 08.63.030. MEETINGS. The board shall hold an annual meeting and may hold
14 special meetings at the call of the chair or a majority of the board members.

1 Sec. 08.63.040. REMOVAL OF BOARD MEMBERS. The governor may only remove
2 a member of the board for good cause.

3 Sec. 08.63.050. POWERS AND DUTIES OF THE BOARD. The board shall
4 (1) establish objective examination requirements and training and education
5 requirements for persons who apply for a license to practice marital and family therapy;

6 (2) examine applicants and issue licenses to qualified applicants;

7 (3) establish continuing education requirements for license renewal;

8 (4) adopt a code of ethical practice for marital and family therapy;

9 (5) hold hearings and order the disciplinary sanction of a person who violates this
10 chapter or a regulation of the board;

11 (6) establish standards for supervisors and supervision under this chapter;

12 (7) report annually to the governor and the department on the board's proceedings
13 each year; the report must include the number of licensure applicants, the number of
14 examinations conducted, the failure rate for each examination, a financial report, and other
15 information requested by the department;

16 (8) enforce the provisions of this chapter and adopt regulations necessary to carry
17 out its duties under this chapter.

18 Sec. 08.63.060. PROCEDURES. The Administrative Procedure Act (AS 44.62) applies
19 to regulations and proceedings under this chapter.

20 ARTICLE 2. MARITAL AND FAMILY THERAPY LICENSES.

21 Sec. 08.63.100. QUALIFICATIONS FOR LICENSE TO PRACTICE. (a) The board
22 shall issue a license to practice marital and family therapy to a person who

23 (1) applies on a form provided by the board;

24 (2) pays the fee established under AS 08.01.065;

25 (3) furnishes evidence satisfactory to the board that the person

26 (A) has not engaged in conduct that is a ground for imposing disciplinary
27 sanctions under AS 08.63.210;

28 (B) holds a master's degree or doctorate in marital and family therapy,
29 another mental health field, or the equivalent, from an accredited educational institution
30 approved by the board for which the person completed a course of study that included
31 instruction substantially equivalent to the following:

- 1 (i) courses in marital and family therapy;
2 (ii) courses in marital and family studies;
3 (iii) courses in human development;
4 (iv) a course in professional studies or professional ethics and law;
5 (v) a course in research; and
6 (vi) one year of supervised clinical practice in marital and family
7 therapy;

8 (C) after receiving a degree described in (B) of this paragraph, has

9 (i) practiced marital and family therapy within three years of the
10 person's application, including 1,500 hours of direct clinical contact with couples
11 and families; and

12 (ii) been supervised in the clinical contact for at least 200 hours,
13 including 100 hours of individual supervision and 100 hours of group supervision
14 approved by the board; and

15 (D) has passed a written or oral examination administered by the board.

16 (b) Under regulations adopted by the board, a person who holds a master's or doctorate
17 degree in marital and family therapy, another mental health field, or its equivalent, from an
18 educational institution approved by the board, but whose course of degree study did not include
19 all the courses or clinical practice requirements set out in (a)(3)(B) of this section may substitute
20 post-degree courses or practice, as approved by the board, to satisfy the requirements of (a)(3)(B)
21 of this section. As provided in this subsection, "mental health field" includes psychiatry,
22 psychology, clinical social work, and pastoral counseling.

23 (c) An applicant who fails an examination given under this section may not retake the
24 examination for a period of six months from the date of the examination that the applicant failed.

25 (d) A license issued under this section shall be renewed biennially by the applicant on
26 a date set by the department and approved by the board. It shall be renewed by payment of the
27 fee established under AS 08.01.065 and by satisfaction of the continuing education requirements
28 established by the board for the renewal of licenses issued under this section.

29 Sec. 08.63.110. LICENSE FOR SUPERVISED PRACTICE. (a) The board shall issue
30 a four-year license for the supervised practice of marital and family therapy to a person who
31 meets the requirements of AS 08.63.100(a)(1), (2), and (3)(A) - (B).

- 1 (b) A licensee under this section may practice only
2 (1) under the direct supervision of a supervisor approved by the board under
3 AS 08.63.120; and
4 (2) in a clinic, social service agency, or other setting approved by the board.
5 (c) A license for supervised practice expires four years from the date of issuance and
6 may not be renewed.
7 (d) A licensee under this section shall submit to the board for its approval a proposed
8 plan for satisfying the supervision requirements of AS 08.63.100(a)(3)(C).
9 (e) A licensee under this section shall use the title "marital therapy associate," "family
10 therapy associate," or other title that is approved by the board.
11 (f) The board shall revoke a license for supervised practice if the person fails the
12 examination required under AS 08.63.100 two or more times.

13 Sec. 08.63.120. AUTHORIZED SUPERVISORS. (a) A person may not supervise a
14 person under this chapter unless approved by the board to be a supervisor.

15 (b) A person who supervises a licensee under this section must

16 (1) have practiced marital and family therapy for five years;

17 (2) be licensed under this chapter; and

18 (3) meet the minimum standards established by the board for approved
19 supervisors.

20 Sec. 08.63.130. TEMPORARY LICENSE FOR THE PRACTICE OF MARITAL AND
21 FAMILY THERAPY. (a) The board shall issue a temporary license for the practice of marital
22 and family therapy to an applicant who satisfies the requirements of AS 08.63.100(a)(1), (2) and
23 (3)(A), (B), and (C) and has been approved by the board to take the marital and family therapy
24 examination.

25 (b) A person may practice under a temporary license until the board issues the results
26 of the first marital and family therapy examination given after issuance of the person's temporary
27 license and either issues or denies a license under AS 08.63.100 to the person.

28 (c) If a licensee under this section fails the marital and family therapy examination, the
29 board may not renew the person's temporary license.

30 Sec. 08.63.140. LICENSURE BY CREDENTIALS. The board shall issue a license to
31 practice marital and family therapy to a person who

1 (1) is licensed or certified for the practice of marital and family therapy in another
2 state that has requirements for the license or certificate that are substantially equal to or greater
3 than the requirements of this state; and

4 (2) meets the requirements of AS 08.63.100(a)(1), (2), and (3)(A).

5 ARTICLE 3. GENERAL PROVISIONS.

6 Sec. 08.63.200. CONFIDENTIALITY OF COMMUNICATION. (a) A person licensed
7 under this chapter may not reveal to another person a communication made to the licensee by
8 a client about a matter concerning which the client has employed the licensee in a professional
9 capacity. This section does not apply to

10 (1) a case conference or case consultation with other mental health professionals
11 at which the patient is not identified;

12 (2) the release of information that the client in writing authorized the licensee to
13 reveal;

14 (3) information released to the board as part of a disciplinary or other proceeding;
15 or

16 (4) situations where the rules of evidence applicable to the psychotherapist-patient
17 privilege allow the release of the information.

18 (b) Notwithstanding (a) of this section, a person licensed under this chapter shall report
19 incidents of child abuse or neglect as required by AS 47.17.

20 (c) Information obtained by the board under (a)(3) of this section is confidential and is
21 not a public record for purposes of AS 09.25.110 - 09.25.140.

22 Sec. 08.63.210. GROUNDS FOR IMPOSITION OF DISCIPLINARY SANCTIONS.
23 After a hearing, the board may impose a disciplinary sanction under AS 08.01.075 on a person
24 licensed under this chapter when the board finds that the person

25 (1) secured a license through deceit, fraud, or intentional misrepresentation;

26 (2) engaged in deceit, fraud, or intentional misrepresentation in the course of
27 providing professional services or engaging in professional activities;

28 (3) advertised professional services in a false or misleading manner;

29 (4) has been convicted of a felony or of another crime that affects the person's
30 ability to practice competently and safely;

31 (5) failed to comply with a provision of this chapter or a regulation adopted under

1 this chapter, or an order of the board;

2 (6) continued to practice after becoming unfit due to

3 (A) professional incompetence;

4 (B) addiction or severe dependency on alcohol or another drug that impairs
5 the person's ability to practice safely;

6 (7) engaged in unethical conduct in connection with the delivery of professional
7 services to clients.

8 Sec. 08.63.220. LICENSE REQUIRED IF DESIGNATION USED. A person who is not
9 licensed under this chapter or whose license is suspended or revoked, or whose license has
10 lapsed, who knowingly uses in connection with the person's name the words or letters
11 "L.M.F.T.," "L.M.F.C.," "Licensed Marital and Family Therapist," "Licensed Marriage and
12 Family Counselor," or other letters, words, or insignia indicating or implying that the person is
13 licensed as a marital and family therapist in this state or who in any way, orally or in writing,
14 directly or by implication, knowingly holds out as being licensed as a marital and family therapist
15 in this state is guilty of a class B misdemeanor.

16 Sec. 08.63.900. DEFINITIONS. In this chapter, unless the context indicates otherwise,

17 (1) "advertise" includes issuing or causing to be distributed a card, sign or device
18 to a person, or causing, permitting, or allowing a sign or marking on or in a building or structure,
19 or in a newspaper, magazine, or directory, or on radio or television, or using other means
20 designed to secure public attention;

21 (2) "board" means the Board of Marital and Family Therapy;

22 (3) "course" means a class of at least three credit hours in a graduate program at
23 an accredited educational institution or an institution approved by the board;

24 (4) "department" means the Department of Commerce and Economic
25 Development;

26 (5) "practice of marital and family therapy" means the diagnosis and treatment
27 of mental and emotional disorders that are referenced in the standard diagnostic nomenclature for
28 marital and family therapy, whether cognitive, affective, or behavioral, within the context of
29 human relationships, particularly marital and family systems; marital and family therapy involves

30 (A) the professional application of assessments and treatments of
31 psychotherapeutic services to individuals, couples, and families for the purpose of treating

1 the diagnosed emotional and mental disorders;

2 (B) an applied understanding of the dynamics of marital and family
3 interactions, along with the application of psychotherapeutic and counseling techniques
4 for the purpose of resolving intrapersonal and interpersonal conflict and changing
5 perceptions, attitudes, and behaviors in the area of human relationships and family life;

6 (6) "supervision" means face-to-face consultation, direction, review, evaluation,
7 and assessment of the practice of the person being supervised, including direct observation and
8 the review of case presentations, audio tapes, and video tapes.

9 * Sec. 2. AS 08.01.010 is amended by adding a new paragraph to read:

10 (33) Board of Marital and Family Therapy (AS 08.63.010).

11 * Sec. 3. AS 08.02.010(a) is amended to read:

12 (a) An acupuncturist licensed under AS 08.06, an audiologist licensed under AS 08.11,
13 a person licensed in the state as a chiropractor under AS 08.20, a dentist under AS 08.36, a
14 marital and family therapist licensed under AS 08.63, a medical practitioner or osteopath
15 under AS 08.64, a registered nurse under AS 08.68, an optometrist under AS 08.72, a registered
16 pharmacist under AS 08.80, a physical therapist or occupational therapist licensed under AS 08.-
17 84, a psychologist under AS 08.86, or a clinical social worker licensed under AS 08.95, shall use
18 as professional identification appropriate letters or a title after that person's name which repre-
19 sents that person's specific field of practice. The letters or title shall appear on all signs,
20 stationery, or other advertising in which the person offers or displays personal professional
21 services to the public. In addition, a person engaged in the practice of medicine or osteopathy
22 under AS 08.64.380 or a person engaged in any manner in the healing arts who diagnoses, treats,
23 tests, or counsels other persons in relation to human health or disease and uses the letters "M.D."
24 or the title "doctor" or "physician" or another title that tends to show that the person is willing
25 or qualified to diagnose, treat, test, or counsel another person, shall clarify the letters or title by
26 adding the appropriate specialist designation, if any, such as "dermatologist", "radiologist",
27 "audiologist", "naturopath", or the like.

28 * Sec. 4. AS 08.03.010(c) is amended by adding a new paragraph to read:

29 (25) Board of Marital and Family Therapy (AS 08.63.010) -- June 30, 1994.

30 * Sec. 5. AS 44.62.330(a) is amended by adding a new paragraph to read:

31 (57) Board of Marital and Family Therapy (AS 08.63.010).

1 * Sec. 6. AS 47.17.290(13) is amended to read:

2 (13) "practitioner of the healing arts" includes chiropractors, mental health
3 counselors, dental hygienists, dentists, health aides, nurses, nurse practitioners, occupational
4 therapists, occupational therapy assistants, optometrists, osteopaths, naturopaths, physical thera-
5 pists, physical therapy assistants, physicians, physician's assistants, psychiatrists, psychologists,
6 psychological associates, audiologists licensed under AS 08.11, hearing aid dealers licensed under
7 AS 08.55, marital and family therapists licensed under AS 08.63, religious healing
8 practitioners, acupuncturists, and surgeons;

9 * Sec. 7. Alaska Rule of Evidence 504(a) is amended to read:

10 (a) DEFINITIONS. As used in this rule:

11 (1) A patient is a person who consults or is examined or interviewed by a
12 physician or psychotherapist.

13 (2) A physician is a person authorized to practice medicine in any state or nation,
14 or reasonably believed by the patient so to be.

15 (3) A psychotherapist is (A) a person authorized to practice medicine in any state
16 or nation, or reasonably believed by the patient so to be, while engaged in the diagnosis or
17 treatment of a mental or emotional condition, including alcohol or drug addiction, [OR] (B) a
18 person licensed or certified as a psychologist or psychological examiner under the laws of any
19 state or nation or reasonably believed by the patient to so be, while similarly engaged, or (C) a
20 person licensed as a marital or family therapist under the laws of a state or nation or
21 reasonably believed by the patient to so be, while similarly engaged.

22 (4) A communication is confidential if not intended to be disclosed to third
23 persons other than those present to further the interest of the patient in the consultation,
24 examination, or interview, or persons reasonably necessary for the transmission of the
25 communication, or persons who are participating in the diagnosis and treatment under the
26 direction of the physician or psychotherapist, including members of the patient's family.

27 * Sec. 8. INITIAL APPOINTMENTS. (a) In making the initial appointments of professional
28 members to the Board of Marital and Family Therapy, the governor shall consider a person licensed for
29 the purpose of AS 08.63.010, added by sec. 1 of this Act, if the person would be entitled to a license
30 under sec. 10 of this Act. The Board of Marital and Family Therapy shall issue a license to practice
31 marital and family therapy to the professional members appointed under this section.

1 (b) A license issued under this section is subject to the same renewal requirements as a license
2 issued under AS 08.63.100, added by sec. 1 of this Act.

3 (c) The initial appointments to the board shall be staggered as provided in AS 39.05.055.

4 * Sec. 9. TRANSITIONAL LICENSING. (a) Notwithstanding AS 08.63.100, added by sec. 1 of
5 this Act, the Board of Marital and Family Therapy shall issue a license to practice marital and family
6 therapy to a person who

7 (1) applies for a license before July 1, 1992;

8 (2) satisfies the requirements of AS 08.63.100(a)(1) - (3)(A), added by sec. 1 of this Act;

9 (3) holds a master's or doctorate degree from an accredited educational institution either
10 in

11 (A) marital and family therapy or another mental health field as defined in
12 AS 08.63.100(b); or

13 (B) an appropriate course of study approved by the board; and

14 (4) has practiced marital and family therapy in the state for at least two years preceding
15 application.

16 (b) A license under this section is subject to the same renewal requirements as a license issued
17 under AS 08.63.100, added by sec. 1 of this Act.

18 (c) The Board of Marital and Family Therapy shall liberally construe the requirements of (a) of
19 this section for the purposes of licensing as a marital and family therapy professional every person who
20 merits licensing by virtue of the person's education, training, and experience in the field of marital and
21 family therapy.

State of Alaska

Committees

CO-CHAIR, HOUSE JUDICIARY
VICE-CHAIR, HOUSE LABOR AND COMMERCE
HOUSE HEALTH, EDUCATION
AND SOCIAL SERVICES



P.O. BOX V
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(907) 465-4712
465-4968/4986
(SESSION)

914 CLAY COURT
ANCHORAGE, ALASKA 99503
(907) 276-6844

Representative Max F. Gruenberg, Jr.
District 11
Spenard, Upper Midtown Anchorage

MEMORANDUM

RECEIVED
JAN 25 A.M.

DATE: January 24, 1991
TO: Representative Georgianna Lincoln
Chair, House Health, Education and Social Services
Committee
FROM: Representative Max Gruenberg *Max*
RE: Scheduling HB 18, Licensing of Marital and family
Therapists

I would like very much appreciate it if you would schedule HB18, "The licensing of Marital and Family Therapist Bill," as soon as it is possible.

HB 18 will protect the public by providing standards and regulation for those who wish to become licensed marital and family therapy practitioners in this state.

It is critical that HB 18 receive early attention in order to prevent a disruption of services for the clients of Alaskan marital and family therapists who will no longer qualify for public assistance reimbursement if a marital and family therapist licensing bill does not become law this year.

If you have any questions, please call me or my Legislative assistant, Mark Handley, at 465-4968.

Thank you very much.

Sponsor Statement

State of Alaska

Committees

CO-CHAIR, HOUSE JUDICIARY
VICE-CHAIR, HOUSE LABOR AND COMMERCE
HOUSE HEALTH, EDUCATION
AND SOCIAL SERVICES



P.O. BOX V
JUNEAU, ALASKA 99811
(907) 465-4712
465-4968/4986
(SESSION)

914 CLAY COURT
ANCHORAGE, ALASKA 99503
(907) 276-6844

Representative Max F. Gruenberg, Jr.
District 11
Spenard, Upper Midtown Anchorage

MEMORANDUM

DATE: January 24, 1991

SUBJECT: Analysis of HB 18, "An Act relating to the practice of marital and family therapy and providing for an effect date

TO: Representative Max Gruenberg

FROM: Mark Handley *MH*

Following is a sectional description of HB 18:

Sec. 1. Article 1 establishes the Board of Marital and Family Therapy and sets out its powers and duties.

Article 2 describes the various types of licenses that can be issued by the board and sets out the requirements that must be met for each type of license.

Article 3 contains general provisions relating to fees, confidentiality of communications, and imposition of disciplinary sanctions. It also contains the basic provision in Sec. 08.63.240 that, unless a person is licensed by the board, the person may not hold himself or herself out to be a licensed marital and family therapist. The bill does not require a person to be licensed in order to practice in the profession.

Sec. 2. Adds the new board to the list of boards in AS 08.01.010.

Sec. 3. Adds licensed marital and family therapists to the listing in AS -8.02.010.

Sec. 4. Adds the new board to the list of boards in AS 08.03.010, sunseting it in 1994.

HB 18 Sectional

Representative Max Gruenberg
January 24, 1991
Page 2

Sec. 5. Adds licensed marital and family therapists to the definition of "health care provider" in the statutes relating to the Medical Indemnity Corporation of Alaska (MICA).

Sec. 6. Adds the new board to the list of agencies governed by the Administrative Procedure Act.

Sec. 7. Adds licensed marital and family therapists to the list of persons required to report suspected child abuse.

Sec. 8. Adds communications between a patient and a marital and family therapist to the privileged communications excluded under Evidence rule 504(a)(3).

Sec. 9. Provides for initial appointees to the board.

Sec. 10. "Grandfather" provision.

Sec. 11. Delays until 1992, the requirement that a person not hold out to be a licensed marital and family therapist unless licensed under this new board.



Alaska Association for Marriage and Family Therapy

a division of The American Association for Marriage and Family Therapy, Inc.
2550 Denali Street, Suite 905, Anchorage, Alaska 99503 (907) 272-2063

January 15, 1991

RECEIVED
FEB 1 - A.M.

Dear Legislator:

During this session, there is a bill sponsored by Representative Max Gruenberg and Senator Drue Pearce for the licensure of Marriage and Family therapists. The bill numbers are SB40 and HB18. We would like to take the opportunity at this time to inform you on the field of Marriage and Family Therapy and the and arguments for licensure. Included in this packet are fact sheets about Marriage and Family Therapy and a newsletter update about both the Alaska Association for Marriage and Family Therapy as well as its impact on a national scope. Also included this packet are a sample of the broad base of support the mental health professions and others have shown for licensure of Marriage and Family therapists.

We feel that consumer advocacy and freedom of choice is an utmost priority, particularly in light of the changes in Medicaid regulations that require licensed providers. Many people who are being helped by MFTs and services paid for by Medicaid will no longer be able to receive that help when those regulations go into effect. Licensure can insure that no one will be left without the necessary mental health services.

We hope you and your aides will take some time to read through the material presented. Thank you for your time and consideration.

Sincerely,

Robert Nelson, Rel.D.
President, AkAMFT
Mercy Dennis, M.A.
Randall G. Jones, M.A.
Co-Chair, Legislative Affairs

President Robert W. Nelson, Rel.D. ++ Pres
Treasurer Lowell Roddy, M.Ed. ++ Board Mem
Board Member Richard Stenbakken, M.A. ++

++ Secretary Sara Griffeth, M.Ed.
++ Board Member Phillip S. Klees, Ph.D.
++ Board Member Martin Garrigues, M.S.

Letters of Support

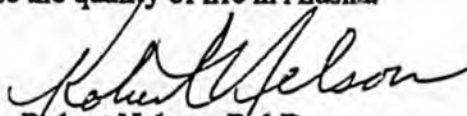
THE ALASKA ASSOCIATION FOR MARRIAGE AND FAMILY THERAPY

NEWSLETTER

SPECIAL BULLETIN FOR STATE LEGISLATORS

This special bulletin of the Alaska Marital and Family Therapists is being distributed to all state legislators and their staff. This is AkAMFT's way of thanking legislators for taking time to learn more about the practice and profession of marriage and family therapy; acquainting them with the many ways with which our profession impacts family life at both the national and state levels; and encouraging an atmosphere of mutual cooperation and assistance between AkAMFT and Alaska legislators.

AkAMFT and its members welcome future opportunities to provide assistance and information to legislators and staff in their efforts to increase the quality of life in Alaska.



Robert Nelson, Ed.D.
President-AkAMFT

Mercy Dennis, M.A.
Randell G. Jones, M.A.
Co-Chair, Legislative Affairs

LEGISLATIVE UPDATE:

Since the early 1980's, the Alaska Association for Marriage and Family Therapy has been engaged in the process of developing legislation which would license the mental health profession of marriage and family therapy. Founded on the belief that licensure is one of the most effective recognized vehicles at the state level to protect the public, AkAMFT is committed to the development of licensure for all health education professionals. Currently, there are six free-standing legitimate, fully-accredited, and educationally sound mental health professions which form the major component of mental health industry, i.e., psychology, marriage and family therapy, mental health counseling, and clinical social work, making up the non-medical arm, while psychiatry and psychiatric nursing form the medical branch.

The need for licensure arises out of several factors. All mental health professions, by whatever name they call themselves "dispense strong medicine" which takes many system-psychotherapeutic forms. The various therapeutic interventions have the power to profoundly impact the family relationship or individual for better or for the worse at the deepest levels. It is the mandated responsibility of the state to protect the (mental) health of its citizens. One way the state has chosen to protect its citizens is through the vehicle licensure. Four mental health professions to this date are licensed by the state. They are: psychiatry, psychiatric nursing, psychology, and social work. Unfortunately, instances where consumers have been disadvantaged or mistreated by those claiming to be mental health professionals are well-documented. It is our strong belief that by

responsibly regulating all mental health professions by means of licensure, the state could effectively close many existing gaps which allow those who are untrained and unqualified to identify themselves, by the same time as those who are highly trained, competent, and ethical in their practice. Licensure would serve to better inform the public regarding qualifications, provide identified and state-sanctioned avenues of redress of which there are none, should violation occur and establish minimal levels of education and supervision requirements. In addition, it is believed that the infusion of qualified professionals will affect the supply/demand ratio by possibly lowering or at least slowing the rise in the cost of services. The need and time is now to license marriage and family therapists.

AN OPEN LETTER TO ALASKA LEGISLATORS

Dear Legislator:

On behalf of the members of the Alaska Division of the American Association for Marriage and Family Therapy (AkAMFT), I am writing to introduce our organization and the profession it represents. As a prelude to a fuller discourse, some highlights are listed below.

1. Marriage and Family Therapy (MFT) is a well-established profession with a distinct body of knowledge and established code of ethics.
2. The scope of knowledge of marriage and family therapy and its related practice are unique in the relationship to other allied professions.
3. Many who provide family therapy services have not obtained the requisite training nor been introduced to the rigorous code of ethics necessary to maintain appropriate practice standards.

Marriage and family therapists provide necessary mental health services to individuals, children, couples, and families. Clinical members of the American Association for Marriage and Family Therapy (AAMFT) are well-trained professionals who subscribe to a rigorous code of ethics for the practice of their profession. Since 1942, the AAMFT has been involved with the problems, needs, and changing patterns of marital and family relationships. The AAMFT is a multi-disciplinary association which has members from all mental health professions (psychiatry, psychology, social work, nursing).

The AAMFT requires that all its members, regardless of discipline of origin, acquire specific and rigorous training including academic work and supervised clinical experience in marriage and family therapy. The AAMFT's membership requirements have become the standards acceptance throughout the United States by which the independent practice of marriage and family therapy is regulated. Currently, 20 states regulate the practice of marriage and family therapy through either licensing or certification. The training of marriage and family therapists is overseen by AAMFT's commission of accreditation for marriage and family therapy education. This commission has been reorganized since 1978 by the U. S. Department of Education as the sole accrediting body for marriage and family therapy education in the United States. In 1986, the Clearinghouse on Licensure Enforcement and Regulation (CLEAR), an affiliate of the council of state governments published a study which reviewed the credentialing of the behavioral science professions. According to that study, an important criteria for determining the existence of a profession is that there is a well-defined body of knowledge and set of skills which thus becomes the basis for defining a profession's scope of practice. In the review conducted by CLEAR, the scope of practice and sample of current regulatory laws of social work, psychology, and marriage and family therapy were examined. CLEAR concluded that while there was some overlap, all mental health professions provide services such as psychotherapy, each of the professions identified unique skills or practiced principles.

It is noteworthy that this non-biased source comprised of state regulators, believes that there is a separate profession of marriage and family therapy. A considerable body of research suggests that marriage and family therapy is an efficient and effective treatment alternative to traditional approaches for a wide variety of emotional and behavioral disorders. For this and other reasons, the federal government has recognized marriage and family therapists for some time. For many years, marriage and family therapists have been eligible mental health providers under the Civilian Health and Medical Program of the Unified Services (Champus). Additionally, marriage and family therapists are listed as one of the core mental health professions by the National Institute of Mental Health, and under federal law (Public Service Act, PL100-6900), as one of the core mental health professions, training programs in marriage and family therapy are eligible to receive clinical training grants on the same basis as programs in medicine, psychology, social work, and nursing. Thus, there is a consistent consensus among federal agencies and national committees that MFT carries distinct status as a profession.

Unfortunately, however not all who provide family therapy services have attained the necessary training for the practice of the profession, nor have they necessarily agreed to be bound by a code of ethics established by their peers. Given the fact that the State of Alaska does not regulate our profession, there exists the potential for untrained individuals to present themselves as marriage and family therapists. This is a source of concern for the qualified professionals and members of the public. Since we know that psychotherapy of any kind can do damage, the public, without the capacity to distinguish qualified professionals, remains more vulnerable to mistreatment. The lack of regulation of the profession of MFT in Alaska may present a greater loss to the public than it does to our professional membership, since many of our members can identify with other professions.

A growing number of marriage and family therapists have received the most contemporary training developed in the field. Often this training is through graduate programs in marriage and family therapy. These mental health professionals are prepared to offer effective treatment options to Alaskan families, yet these professionals are neither recognized nor regulated. Trained family therapists, although sanctioned nationally as legitimate providers in mental health services, have no such status in Alaska. The result is that in many contexts, Alaskan do not have a real option to select a qualified family therapist for treatment because most reimbursement systems do not recognize unregulated providers. This denies freedom of choice for mental health services to Alaskans who may already be disadvantaged.

We do not believe this state of affairs, with the public being exposed to unqualified and unprofessional practitioners, and potentially prohibited from legitimate treatment options has been the Governor's nor the legislators' intent. Rather, it may be due to limited awareness of the part of state officials regarding the professional of marriage and family therapy. In a state known to be in the vanguard when it comes to protecting the general welfare of its citizenry, these seems unfortunate. As mentioned, some twenty states have now recognized the need to regulate and recognize the profession of marriage and family therapy. Alaska should not be among the last to do so. We strongly urge that you consider exploring with us ways to address this issue. Members of AkMFT are available to meet with you to discuss appropriate options. AkMFT members also stand ready to act as consultants with regard to a wide variety of issues relevant to families in Alaska. We hope you find the enclosed special issue of our newsletter helpful in increasing your knowledge of our organization.

Sincerely,

Robert Nelson, Rel.D.
President-AkAMFT

FACT SHEET

LICENSING MARRIAGE & FAMILY THERAPISTS

++ The Alaska Association for Marriage and Family Therapy (a division of the American Association for Marriage and Family Therapy which represents over 17,000 qualified marriage and family therapists in the United States, Canada and abroad) believes that licensure and regulation by the State, as the steward of the public cause, is one of the most effective vehicles to protect the public. AkAMFT advocates the licensure by the State of Alaska of all mental health professions.

++ There are six distinct and fully accredited mental health professions in Alaska: medical branch (including psychiatry & psychiatric nursing) and non-medical branch (including psychology, social work, marriage & family therapy, and mental health counseling). The only clearly defined clinical discipline not licensed and regulated by the State of Alaska is marriage & family therapy.

++ Marriage and family therapy has long been recognized by the Federal Government as a separate and distinct mental health discipline . . . not simply a part of psychiatry, psychology or social work.

++ Listed in the Sourcebook on Health Professions (published by the U.S. Dept. of Health Human Services, through the Health Resources and Services Administration)

++ The Public Health Service Act lists marriage and family therapy as separate and distinct for receiving training funds through the National Institute of Mental Health.

++ The U. S. Dept of Health, Education and Welfare have designated AAMFT's Commission on Accreditation as the sole national accrediting agency for graduate and post-degree educational and training programs in the field of marriage and family therapy.

++ CHAMPUS has clearly defined marriage and family therapy and qualified Clinical Members of AAMFT as providers.

++ Marriage and family therapists have been providers under Medicaid for many years.

++ Alaska needs to regulate and license marriage and family therapists. 22 States currently license and regulate marriage and family therapists . . . and an additional 22 States have licensure legislation before them.

++ All of the mental health professions "dispense strong medicine" . . . mental health interventions profoundly impact the individual or family at deep levels and in profound ways (for good or ill).

++ The State of Alaska exists to serve the people of Alaska and their needs and interests. (Some marriage and family therapists choose membership in the American Association for Marriage and Family Therapy. And, whereas Clinical Membership in AAMFT . . . much like other clinical professionals being a part of NASW, AMA or APA . . . set high standards for those who qualify and choose such membership, voluntary "certification" is no substitute for regulation by the State of Alaska.)

++ The State of Alaska holds the only possibility of responsibly and effectively regulating all mental health professions and thereby effectively closing many existing gaps that allow persons who are untrained and unqualified to identify themselves . . . and at the same time enable those who are highly trained, competent, and ethical in their practice to be identified as well.

++ Faced with marital or family stress, Alaskan families are not in optimum position to evaluate the stated credentials of persons holding themselves out as marriage and family herapists. But under such stress, thy need the help of well-qualified therapists who are identified as such by State regulation. Licensing will provide Alaskan consumers with information about qualifications of professionals in the field, and they can then make more informed decisions based on objective criteria administered by a public body.

++ There is a special danger in the mental health field: Persons holding themselves out to the public in misleading ways about their qualifications. It can be very lucrative to hang up a shingle or represent oneself as a "marriage and family therapist" regardless of training, clinical experience or supervision in the field. It has not been the intent of either the governor's office or the legislature to allow the Alaskan consumer to be exposed to unqualified, untrained and unsupervised treatment. It has rather been a result of limited awareness on the part of state officials regarding the profession of marriage and family therapy. But the result is the same.

++ The Division of Medical Assistance of the Alaska State Department of Health and Social Services, under federal mandate, is establishing new regulations for Medicaid in June 1991. Under the revised regulations, marriage and family therapists will be required to be licensed by the State of Alaska. The Division strongly supports licensing of marriage and family therapists as a means to ensure standards of care under Medicaid. Many marriage and family therapists presently provide therapy to Medicaid patients, maintaining AAMFT Clinical Membership and standards and carrying a high percentage of Medicaid caseloads for many years now. Such provider services will no longer be available to Alaskans. **The proposed licensing legislation, if passed during this First Session of the Seventeenth Legislature and signed by the Governor will ensure that these services continue uninterrupted.**

++ Because the function or practice of doing marriage and family therapy is not prohibited as such under the proposed legislation . . . other mental health therapists would continue to be able to work with couples and with families under their own respective State-approved licensing and regulating Statutes.

++ Under the proposed legislation, however, consumers would be able to clearly identify therapists who meet the qualifications to be a "Licensed Marriage and Family Therapist" (LMFT) or "Licensed Marriage and Family Counselor" (LMFC).

++ A growing number of mental health professionals have received specialized training in marriage and family therapy. Some of those may choose to seek licensure as "LMFT" or "LMFC" under the proposed legislation. A growing number of students in training are anticipating their primary area of work will be in the field of marriage and family therapy and will be seeking licensure under this legislation.

+ + +

++ Alaska has been in the vanguard of establishing social policy and maintaining progressive legislation in the field of alcohol treatment and general mental health care.

+ + +

++ Alaska must not be one of last States to establish clear-cut regulation of the profession of marriage and family therapy.

+ + +

++ Alaskan Medicaid patients must continue to be given the opportunity to choose marriage and family therapy as their choice of care.

+ + +

++ Alaskans must be allowed the opportunity to set public standards and regulate a clinical field that touches lives so profoundly.

++ Research as shown that marriage and family therapy is one of the most effective treatment approaches for many of the problems facing Alaska's families: family violence, substance abuse, delinquency and school problems, childhood and adolescent disorders, eating disorders, and marriage and families in trouble. (See: A Report of the Governor's Commission on Children and Youth, Our Greatest Natural Resource, Investing in the Future of Alaska's Children, January 1988).

2062

David R. Samson M.D.
Board Certified Psychiatrist

November 21, 1990

Jim Nordlund
* Representative Johnny Ellis
3111 "C" Street, Suite 455
Anchorage, Alaska 99503

Dear Mr. Nordlund:

This letter is in support of licensing for marriage and family therapists. I wrote a similar letter on October 20, 1989 supporting it for last year's legislature.

As a psychiatrist, I believe that marriage and family therapists provide specific services that are needed in our communities. I believe it is essential that our state government assures the public that people who claim to be marriage and family therapists do indeed have the necessary advanced educational requirements and experiences to provide marriage and family services. This can best be arranged with specific licensing and re-licensing requirements.

I have worked with multiple therapists in and out of community mental health center settings and in private practice. This includes several trained marriage and family therapists. I have been very impressed with their continuing education efforts over the several years that I have been working with them and think they do an excellent job continuing their professional competence.

I urge that the state legislature pass legislation in the coming year to insure that licensing exists for marriage and family therapists. I wholeheartedly support this effort.

Sincerely yours,


David R. Samson, M.D., F.A.P.A.



515 E. Dahlia
P.O. Box 1687
Palmer, AK 99645
907-745-4813

January 5, 1990

Dear Governor and Legislators,

I strongly support the state of Alaska establishing certification or licensing requirements at the state level for Family and Marriage Therapists.

As Associate Administrator of Health Services at Valley Hospital, I think the assurance licensure provides, that family and marriage therapists have been properly trained, is essential when referring patients and employees to their services.

It has been my observation that at the time a family or couple are referred for therapy, they are often in crisis, and extremely vulnerable to a therapists guidance and influence. An, improperly trained therapist represents a threat to these at risk individuals.

Passage of state legislation, insuring licensure of family and marriage therapists is urgently needed, and has my complete support.

Sincerely,

Christine Blackgoat,
Associate Administrator
of Health Service



GREATER WASILLA CHAMBER OF COMMERCE

COTTONWOOD CREEK MALL

P.O. BOX 871826

WASILLA, ALASKA 99687

(907) 376-1299

RESOLUTION

- WHEREAS there have been cases of abuse and mistreatment by people claiming to be qualified marriage and family therapists.
- WHEREAS there are currently no laws regulating the practice of marital and family therapy in the State of Alaska.
- WHEREAS the public should have the right to know that practitioners claiming to be marital and family therapists have met professional standards and are qualified to perform marital and family therapy.
- WHEREAS the State of Alaska has developed regulations and licensing requirements for other health care providers.
- BE IT RESOLVED that the Greater Wasilla Chamber of Commerce supports the concept of regulation and licensing of practitioners of marital and family therapy, the establishment of a board of marital and family therapy, and the qualifications for license to practice marital and family therapy as outlined in House Bill - 305.

Signed,
Rocky Spear

A handwritten signature in black ink, appearing to read "Rocky Spear", is written over the typed name.

President,
Greater Wasilla Chamber of Commerce

5/18/89



CHARTER NORTH HOSPITAL

COUNSELING CENTERS

1001 Noble Street, Suite 380
Fairbanks, Alaska 99701
(907) 456-7575

240 E. Tudor Road, Suite 240
Anchorage, Alaska 99503
(907) 561-7576

951 E. Bogard Road, Suite 102
Wasilla, Alaska 99687
(907) 373-7575

Optilast Weight Loss
(907) 561-7577
Chemical Dependency
(907) 561-7576

February 13, 1989

Mercy Dennis
2550 Denali Street
Suite 905
Anchorage, Alaska 99503

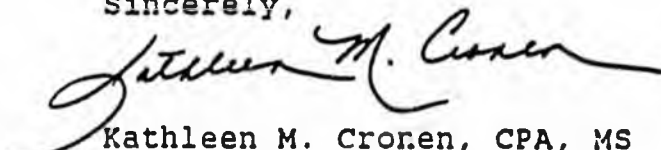
Dear Mercy:

I am writing in support of licensing for Marriage and Family Therapy by the State of Alaska. Alaska currently licenses and regulates psychiatry, psychiatric nursing, clinical psychology and psychological associate, and social work. Marriage and family therapy is recognized as a separate mental health discipline by the Federal government. Currently, 18 states license and regulate marriage and family therapists with an additional 22 states considering such legislation in 1989.

As a certified professional in the State of Alaska, I know that licensure and ongoing regulation is essential to maintaining both quality and integrity. I realize that some marriage and family therapists choose membership in the American Association of Marriage and Family Therapy. However, such voluntary membership is no substitution for regulation by the State. As the Administrator of Charter North Hospital, I am gravely concerned at the lack of regulations and requirements for licensure by individuals performing therapy.

Best of luck in this endeavor. Please feel free to contact me for further support on this matter.

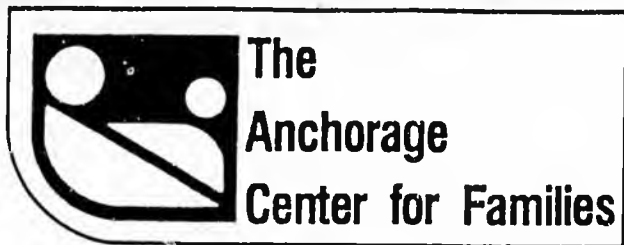
Sincerely,



Kathleen M. Cronen, CPA, MS
Administrator

KMC:rlr
2088





**The
Anchorage
Center for Families**

- Intermission
- Family Connection
- The Center for Children and Parents

3745 Community Park Loop, Suite 201 • Anchorage, Alaska 99508 • (907) 276-4994

April 5, 1989

Mercy Dennis
2550 Denali, Suite 905
Anchorage, Alaska 99503

Dear Mercy:

I am writing to express my support of your efforts to put in place a licensing system for private practice marriage and family therapists. Recent data show that more and more mental health services are being provided by a wide variety of practitioners with very different backgrounds. As you know, at present in Alaska, there is no way for a consumer to judge the difference in quality of care that may be provided by these various practitioners. With a licensing system in place, based on accepted professional standards of certification and completion of extensive supervision requirements, Alaskan consumers will be better assured that they are purchasing quality mental health services.

Please let me know if I can assist you in this important effort.

Sincerely,

Peter Scales, Ph.D.
Executive Director



A United Way Agency

Strengthening Families Since 1972

Southcentral Alaska Chapter
National Committee for
Prevention of Child Abuse



The Family and Children's Clinic

561 SO. DENALI ST., SUITE A
PALMER, ALASKA 99645

(907) 745-3327

KENNETH P. FALLON, JR., M.S.W., A.C.S.W.
CLINICAL SOCIAL WORKER
CHERYL F. MITCHELL, M.S.W.
CLINICAL SOCIAL WORKER
MARY DALL, M.S.W.
CLINICAL SOCIAL WORKER

CHRISTOPHER L. DATTAN, M.D.
PSYCHIATRIST
PATRICIA SANDBERG, M.A.
THERAPIST
CHRISTINE CHILDERS, Ph.D.
CLINICAL PSYCHOLOGIST

December 4, 1989

Dr. Robert Nelson, President-Elect
Alaska Association for Marriage
and Family Therapists
4502 Cassin Drive
Anchorage, AK 99507

Dear Dr. Nelson:

I am writing this letter in support of the certification and/or licensing at the Alaska state level for marriage and family therapists.

As an Alaska state licensed clinical social worker, I feel strongly that licensing of family and marriage therapists is necessary to insure that the public receives the best possible level of services. Licensure would go a long way toward assuring the public that each licensed marriage and family therapist has adequately completed the nationally standardized graduate-level educational requirements as well as several years of supervised training necessary to be competent to deliver these services.

I have worked closely with a number of marriage and family therapists, and have attended seminars and continuing education classes with them. I respect their level of expertise and believe that their services are needed in Alaska.

I strongly recommend passage of state legislation in the coming year to license marriage and family therapists. If I can be of further assistance in this regard, please contact me.

Sincerely,

Cheryl F. Mitchell, M.S.W.

Cheryl F. Mitchell
Licensed Clinical Social Worker



Aron S. Wolf, M.D., F.A.P.S.—President
Thomas Brown, Administrator
Randall James, M.D.—Vice President
Helen Craig, M.S.W., A.C.S.W.—Secretary Treasurer
Greg McCarthy, M.D.
David Holladay, M.D.
Martin Aronson, Ph.D.
Karen A. Sontag, Psy.D.
Mehi L. Holson, M.S.W., A.C.S.W.
Donald Sparrow, M.S.W., A.C.S.W.
Wendy Chana, M.S.W., A.C.S.W.
Jackie T. Jodny, M.S.W., A.C.S.W.

December 11, 1990

Senator Dru Pearce
3111 C Street, Fifth Floor
Anchorage, Alaska 99503

Dear Senator Pearce:

We are very happy that you are sponsoring the Marriage and Family Therapy licensing bill. As you know, MFT is a distinct and separate mental health discipline and should be recognized as such. Licensing insures that adequately trained professionals are in the field. Consequently, we see licensure as a means to protect the public and to protect the integrity of all the mental health fields.

We are also well aware that lack of licensure is the only reason many insurance companies do not reimburse therapists for their services. We are seeing that particularly with Medicaid at this time. Consequently, we see licensing for trained mental health professionals as a need that the State needs to address. We strongly support the licensure of MFT's.

Thank you.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Aron S. Wolf'.

Aron S. Wolf, M.D.
President, Langdon Psychiatric Corporation

ASW/cs



ANCHORAGE
SCHOOL DISTRICT

4600 DeBarr Avenue
P.O. Box 196614
Anchorage, Alaska 99519-6614
AREA CODE [907] 333-9561

SCHOOL BOARD

Sharon Richards
President

Carol Stolpe
Vice President

Darryl Jordan
Clerk

Carol Christensen
Treasurer

Vince Casey

Walter T. Featherly

Theresa Obermeyer

SUPERINTENDENT

Thomas C. O'Rourke

January 28, 1991

Ms. Maureen Christensen
2836 N. Circle
Anchorage, Alaska 99507

Dear Maureen:

Thank you for the copies of House Bill No. 81 and Senate Bill No. 40.

We at the Anchorage School District are very concerned that our employees, as well as all citizens, have proper protection in the area of health care services, and we are in full support of your efforts to obtain legislation concerning the proper protection in this area of health care.

We hope your efforts are successful, and we look forward to seeing the final legislation that is approved.

Sincerely,

Warren Dvorak, Manager
Benefits Department

bb

WILLIAM A. WORRALL, MD

2550 Denali Street, Suite 603
Anchorage, Alaska 99503

Telephone: (907) 276-1504

December 10, 1990

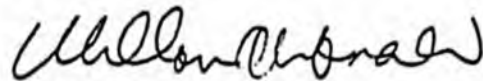
We urge the Alaska State Legislature to support licensing for masters level therapists as proposed by the Alaska Association of Marriage and Family Therapists.

We believe that licensing is one of the few tools available to assure a high level of protection for people who seek counseling from therapists in private practice.

Licensing can be used to:

1. Establish a minimum set of standards for therapists.
2. Verify that therapists have received adequate training, supervision and experience in their fields before they begin to practice.
3. Assure that therapists maintain the highest level of ethics and clinical practice.
4. Provide an avenue of removing therapists who fail to meet these standards.
5. Widen the range of help available to the public since many insurance companies require that mental health providers be state licensed before they will reimburse clients for fees.

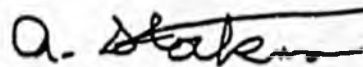
Sincerely,



William Worrall, M.D.



David Sperbeck, Ph.D.



Ann Stockman, MSW, LCSW



Aron E. Wolf, M.B., F.A.P.C. — President
Barbara Torner, Administrator
Randall Jones, M.A. — Vice President
Helen Craig, M.S.W., A.C.S.W. — Secretary/Treasurer
Greg McCarthy, M.D.
David Holladay, M.D.
Martin Atrops, Ph.D.
Karen A. Sontag, Psy.D.
Michl J. Nelson, M.S.W., A.C.S.W.
Donald Sparrow, M.S.W., A.C.S.W.
Wendy Chase, M.S.W., A.C.S.W.
Jockie T. Jodry, M.S.W., A.C.S.W.

December 11, 1990

Representative Max Gruenberg
3111 C Street, Fourth Floor
Anchorage, Alaska 99503

Dear Representative Gruenberg:

We are very happy that you are sponsoring the Marriage and Family Therapy licensing bill. As you know, MFT is a distinct and separate mental health discipline and should be recognized as such. Licensing insures that adequately trained professionals are in the field. Consequently, we see licensure as a means to protect the public and to protect the integrity of all the mental health fields.

We are also well aware that lack of licensure is the only reason many insurance companies do not reimburse therapists for their services. We are seeing that particularly with Medicaid at this time. Consequently, we see licensing for trained mental health professionals as a need that the State needs to address. We strongly support the licensure of MFT's.

Thank you.

Sincerely,

G McCarthy

Greg McCarthy, M.D.

GM/cs

Law Office of
Marvin H. Clark, Jr.

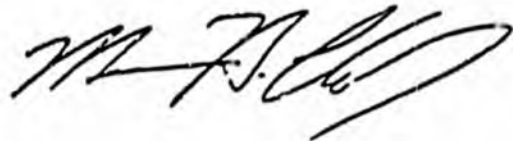
P.O. Box 87-4088
Wasilla, Alaska 99687
(907) 373-0121

TO: State Legislators
FROM: MARVIN CLARK
DATE: 1/10/91

I wish to stress the importance of this State ensuring that Marriage and Family Therapists can be licensed in Alaska. I am aware that Marriage and Family Therapists provide a service that is needed in our community, yet there is no assurance that people who say they are Marriage and Family Therapists indeed possess the training and experience necessary to perform those functions. It is important that the State enact licensing specifically to assure adequate training and experience be required for those who practice the profession of Marriage and Family Therapists.

Other mental health professionals have access to licensing in the State of Alaska; however, Marriage and Family Therapists have different background training and experience and provide an alternative mental health service, therefore, they also need licensing.

Please pass a licensing law for Marriage and Family Therapists during this 1991 session of the legislature. Thank you for your attention to this matter.





Aron E. Wolf, M.B., A.A.P.A. — President
Theresa Surran, Administrator
Randall Jones, M.A. — Vice President
Helen Craig, M.S.W., A.C.S.W. — Secretary/Treasurer
Greg McCarty, M.D.
David Holladay, M.D.
Martin Atraga, Ph.D.
Karen A. Sonzig, Psy.B.
Micki J. Nelson, M.S.W., A.C.S.W.
Donald Sparrow, M.S.W., A.C.S.W.
Wendy Chase, M.S.W., A.C.S.W.
Jackie T. Jodrey, M.S.W., A.C.S.W.

December 27, 1990

Senator Virginia Collins
3111 C Street, Ste. 412
Anchorage, Alaska 99503

Dear Senator Collins:

I am writing to ask for your consideration of a bill to license marriage and family therapists which is to be introduced in the upcoming legislative session.

I support the intent of this bill which is to ensure that persons who offer their services to the public as marriage and family therapists have both the education, training, and experience to do so competently, and will do so ethically. At the present time, there is no assurance that this occurs in Alaska.

If you have questions concerning this bill, I would be happy to try and answer them.

Sincerely,

A handwritten signature in cursive script that reads 'Donald Sparrow'.

Donald Sparrow, A.C.S.W.
2050 Waldron Drive
Anchorage, Alaska 99507

DS/cs



The
Episcopal
Diocese of Alaska

The Rt. Rev. George C. Harris, Bishop

Post Office Box 441

Fairbanks, Alaska 99707-0441

Telephone (907) 452-3040

March 2, 1989

The Honorable Steve Cowper
State of Alaska
Juneau AK 99802

Dear Governor Cowper:

Of the many fiscal issues facing state government at this time, the licensing of marriage and family therapists is an issue of significant importance for consumer protection.

Incompetent people practicing in the mental health professions are very dangerous, and I feel the state needs to provide the people of this state with the necessary protection to ensure their safety and well-being. State regulation is important in providing consumers with information about credentialed professionals.

Currently, 18 states have licensing laws that regulate the practice of marriage and family therapy. Twenty-two additional states are presently considering such legislation.

Clergy in our parishes are on the front-line for referring families for marriage and family therapy. They need to have information about quality referrals. They need to know that persons who advertise themselves as marriage and family therapists do, in fact, have the training, experience, and clinical supervision they claim. The State of Alaska is the only public agency that can provide such through licensing and regulation, as it does in the case of clinical social workers, psychiatrists, clinical psychologists, psychiatric nurses, etc.

I urge you to consider and enact legislation into law that will license and regulate the field of marriage and family therapy in order to protect the people of Alaska and to promote standards of excellence across the entire field of mental health providers in our state.

Yours in Christ,

George C. Harris

George C. Harris

*Dictated by the bishop but signed in his absence.

STATE OF ALASKA
1992 LEGISLATIVE SESSION

FISCAL NOTE

BILL NO. C5HB 18(FIN)

Revision Data: _____ Department Affected: Commerce & Economic Development
 Title: An Act regulating the practice of marital and family therapy BRU: Occupational Licensing
 Component: Administration
 Sponsor: Rep. Greenberg et al
 Requestor: Rep. Greenberg COMPONENT SERIAL NO.

0	3	5	6
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 93	FY 94	FY 95	FY 96	FY 97	FY 98
PERSONAL SERVICES	3.6	3.6	3.6	3.6	3.6	3.6
TRAVEL	19.7	16.5	11.6	11.6	11.6	11.6
CONTRACTUAL	10.7	10.7	10.7	10.7	10.7	10.7
SUPPLIES	1.0	1.0	1.0	1.0	1.0	1.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	35.0	31.8	26.9	26.9	26.9	26.9

CAPITAL	0.0	0.0	0.0	0.0	0.0	0.0
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REVENUE	24.0	0.0	24.0	0.0	24.0	0.0
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FUNDING: (Thousands of Dollars)

GENERAL FUND	11.0	31.8	2.9	26.9	2.9	26.9
FEDERAL FUNDS	0.0	0.0	0.0	0.0	0.0	0.0
OTHER - GF/PR	24.0	0.0	24.0	0.0	24.0	0.0
TOTAL	35.0	31.8	26.9	26.9	26.9	26.9

POSITIONS:

FULL-TIME	0.0	0.0	0.0	0.0	0.0	0.0
PART-TIME	0.0	0.0	0.0	0.0	0.0	0.0
TEMPORARY	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary)

C5HB 18(FIN) establishes a five-member Board of Marital and Family Therapy to establish examination, training and education requirements for entry into the profession, and to issue licenses to qualified individuals.

Prepared By: Jennifer Strickler Phone: 465-2144
 Division: Occupational Licensing Date: 02/18/92
 Approved by Commissioner: Glen A. Olds
 Agency: Commerce & Economic Development Date: 2-18-92

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

CONTINUATION OF FISCAL NOTE ANALYSIS - CSHB 18(FIN)

This fiscal note represents the cost of licensing marital and family therapists with a five-member board and an estimate of 40 practitioners who would seek and qualify for licensure. Costs of the program are projected based on the number of licensees and mandates in the bill. Therefore, costs associated with the marital and family therapy licensing program are projected as follows:

PERSONAL SERVICES \$ 3.6

To provide administrative staff support.

TRAVEL \$ 19.7

In FY 93, this funding will provide for four face-to-face meetings, two in Anchorage and two in Juneau, assuming two members are from the Anchorage area, two from Juneau, one from Fairbanks; and three division staff (Director, Licensing Examiner, and Regulations Specialist) to attend each meeting.

In FY 94, funding provides for three board meetings and travel to administer the licensing examination in various locations throughout the State. (\$16.5)

In FY 95 forward, the licensing program will have been in operation for two years, and therefore, require fewer meetings to conduct its business. The number of board meetings is reduced to two meetings each year. This funding also provides for travel to administer the licensing examination in various locations. (\$11.6)

CONTRACTUAL \$ 10.7

This funding provides for printing, advertising, postage and communication costs.

SUPPLIES \$ 1.0

Funding will provide standard office supplies.

Grand Total: \$ 35.0

REVENUE

The revenues are based on 40 practitioners paying a licensing fee of \$600 for a two-year license. Because licenses are issued on a biennial cycle, revenues are doubled every other year. As indicated, 40 practitioners will not support a licensing program with a five-member board unless licensees are willing to pay incredibly high licensing fees. As an alternative, the licensing program may have to be supplemented by general funds or fees from other licensing areas.

AS 08.01.065(c), Fees established by regulation provide that the "department may establish a fee that is less than the cost of the activity for which the fee is charged if the department determines that it is not reasonable to impose the full cost of the activity on the applicant or licensee."

1992 LEGISLATIVE SESSION

Revision Date: _____ Department Affected: Commerce & Economic Development
 Title: An Act relating to professional licensing and BRU: Occupational Licensing
amending Alaska Rule of Evidence 504(a)(3);... Component: Administration
 Sponsor: Reps. Gruenberg, et al
 Requestor: House HES COMPONENT SERIAL NO.

0	3	5	6
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 93	FY 94	FY 95	FY 96	FY 97	FY 98
PERSONAL SERVICES	3.8	3.8	3.8	3.8	3.8	3.8
TRAVEL	9.8	9.8	7.4	7.4	7.4	7.4
CONTRACTUAL	10.9	10.9	10.9	10.9	10.9	10.9
SUPPLIES	1.0	1.0	1.0	1.0	1.0	1.0
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	25.5	25.5	23.1	23.1	23.1	23.1

CAPITAL						
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REVENUE	51.0		46.2		46.2	
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER - GF/PR	25.5	25.5	23.1	23.1	23.1	23.1
TOTAL	25.5	25.5	23.1	23.1	23.1	23.1

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary)

2d CSHB 18(2d HES) establishes a five-member Board of Marital and Family Therapy for one year to establish examination, training and education requirements for entry into the profession, and to license qualified individuals. The bill also extends the Board of Psychology and Psychological Associates for one year and amends AS 08.86.162.

Prepared By: Jennifer Strickler *JS* *23* Phone: 465-2144Division: Occupational Licensing Date: 03/11/92Approved by Commissioner: Glenn A. Olds *Glenn A. Olds*Agency: Commerce & Economic Development *Commerce & Economic Development* Date: 3.11.92

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

CONTINUATION OF FISCAL NOTE ANALYSIS - 2d CSHB 18(2d HES)

This fiscal note represents the cost of licensing marital and family therapists with a five-member board, and based on an estimated 40 practitioners who would seek and qualify for licensure. Program costs are based on the number of licensees and statutory requirements in the bill. The following is an explanation of program-related costs:

PERSONAL SERVICES \$ 3.8

To provide administrative staff support.

TRAVEL \$ 9.8

In FY 93, this funding will provide two face-to-face meetings, one in Anchorage and one in Juneau, assuming two members are from the Anchorage area, two from Juneau, one from Fairbanks; and three division staff (Director, Licensing Examiner, and Regulations Specialist) to attend each meeting. This funding will also provide for administration of licensing examinations in various locations.

(This cost is lower than the amount shown on previous fiscal notes as a result of changes in State per diem policies, mainly that travellers are now entitled only to a prorated per diem on the first and last day of travel.)

Because of the newness of the licensing program, the FY 94 funding continues to provide for two board meetings if needed and travel to administer licensing examinations.

In FY 95 forward, the licensing program will have been in operation for two years, and therefore, require fewer meetings to conduct its business. The number of board meetings is reduced to one meeting each year. This funding will also provide travel to administer the licensing examination in various locations. (\$7.4)

CONTRACTUAL \$ 10.9

This funding provides for printing, advertising, postage and communication costs.

SUPPLIES \$ 1.0

Funding will provide standard office supplies.

Grand Total: \$ 25.5

REVENUE

Since the estimated number of practitioners are small (40 individuals), licensing fees will be high if this program is expected to entirely fund its activities with general fund/program receipts. The division will work with supporters of the program to ensure licensing fees support entire costs of this program. Licenses are issued for a two-year period and therefore, revenues are shown every other year. Because of the staggered renewal cycle of all licensing programs, costs incurred in a non-renewal year will be covered by occupations renewing in that year. Likewise, revenues generated by this program during a renewal year will do the same for other licensing programs not renewing that year. The main objective is to ensure that fees collected from this program is sufficient to cover the average program costs.

AS 08.01.065(c), Fees established by regulation provide that the "department may establish a fee that is less than the cost of the activity for which the fee is charged if the department determines that it is not reasonable to impose the full cost of the activity on the applicant or licensee."

CONTINUATION OF FISCAL NOTE ANALYSIS - CSSB 40 (HES)

This fiscal note represents the cost of licensing marital and family therapists with a five-member board and an estimate of forty (40) practitioners who would seek and qualify for licensure. Costs of the program are projected based on the number of licensees and mandates in the bill. Therefore, costs associated with the marital and family therapy licensing program are projected as follows:

Personal Services: \$ 3.6

To provide administrative staff support.

Travel: \$ 12.7

In FY 92, this funding will provide for two face-to-face meetings (one in Anchorage and one in Juneau), assuming two members are from the Anchorage area, two from Juneau, one from Fairbanks; and three division staff (Director, Licensing Examiner, and Regulations Specialist) to attend each meeting; and two additional meetings to be held by teleconference.

In FY 93, funding provides for three board meetings (two face-to-face and one by teleconference), and travel to administer the licensing examination in various locations throughout the State. (\$12.7)

In FY 94 forward, the licensing program will have been in operation for two years, and therefore, require fewer meetings to conduct its business. The number of board meetings is reduced to two meetings each year. This funding also provides for travel to administer the licensing examination in various locations. (\$11.6)

Contractual: \$ 10.7

This funding provides for printing, advertising, postage and communication costs.

Supplies: \$ 1.0

Funding will provide standard office supplies.

Grand Total: \$ 28.0

REVENUE:

The revenues are based on 40 practitioners paying a licensing fee of \$350 per year. Licenses are issued on a biennial cycle; therefore, revenues are doubled every other year ($40 \times \$350 \times 2 = \$28,000$). As indicated, a license fee of \$350 per year (\$700 biennial), will support the costs of the licensing program in the first year.

Based on 40 practitioners, licensing fees will only be able to cover full program costs with a five-member board every other year unless licensees are willing to pay incredibly high annual licensing fees.

REVENUE

The revenues are based on 40 practitioners paying a licensing fee of \$600 for a two-year license. Because licenses are issued on a biennial cycle, revenues are doubled every other year. As indicated, 40 practitioners will not support a licensing program with a five-member board unless licensees are willing to pay incredibly high licensing fees. As an alternative, the licensing program may have to be supplemented by general funds or fees from other licensing areas.

AS 08.01.065(c), Fees established by regulation provide that the "department may establish a fee that is less than the cost of the activity for which the fee is charged if the department determines that it is not reasonable to impose the full cost of the activity on the applicant or licensee."

State of Alaska



House Majority Leader
COMMITTEES
HOUSE JUDICIARY
HOUSE RULES
HOUSE STATE AFFAIRS
SPECIAL COMMITTEE
MILITARY AND VET. AFFAIRS
LEGISLATIVE COUNCIL

Representative Max F. Gruenberg, Jr.
District 11
Spennard, Upper Midtown Anchorage

P.O. Box V
JUNEAU, AK 99811
(907) 465-3718
465-4968/4986
(SESSION)

3111 C STREET, SUITE 440
ANCHORAGE, AK 99503
(907) 561-7621

MEMORANDUM

DATE: March 8, 1992

TO: Members of the House HESS Committee

FROM: Representative Max Gruenberg *Max*

RE: Support for CSHB 18 (), "The of Licensing of Marital and Family Therapists Bill."

I would very much appreciate your support for CSHB 18(), "The Licensing of Marital and Family Therapists Bill".

CSHB 18() will protect the public by providing standards and regulation for those who wish to become licensed marital and family therapy practitioners in this state.

This new draft of HB 18 is exactly the same as the version of SB 40 which passed the legislature and was vetoed last year, except that the bill has being given a one year sunset date, and the title of the bill has been broadened.

The purpose of moving this new draft is to provide a vehicle for marital and family therapists to become licensed regardless of what is finally worked out regarding the extension or merger of other behavioral science boards.

If you have any questions, please call me or my Legislative Assistant, Mark Handley, at 465-4968.

Thank you very much.

HB18.SUP\MTH

Sponsor Statement

7-LS0268VP
Luckhaupt
3/5/92

2d CS FOR HOUSE BILL NO. 18 (2d)
IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - SECOND SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES GRUENBERG, M.A.Miller, Carney, B.Davis

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to professional licensing and amending Alaska Rule of Evidence
2 504(a)(3)."

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

4 * Section 1. AS 08 is amended by adding a new chapter to read:

5 CHAPTER 63. MARITAL AND FAMILY THERAPY.

6 ARTICLE 1. BOARD OF MARITAL AND FAMILY THERAPY.

7 Sec. 08.63.010. BOARD ESTABLISHED. (a) There is established the Board of Marital
8 and Family Therapy.

9 (b) The board consists of three persons licensed under this chapter and two members of
10 the public.

11 Sec. 08.63.020. BOARD APPOINTMENTS. The governor shall appoint the members
12 of the board subject to confirmation by the legislature.

13 Sec. 08.63.030. MEETINGS. The board shall hold an annual meeting and may hold
14 special meetings at the call of the chair or a majority of the board members.

2d CS HE 18(2d)

1 Sec. 08.63.040. REMOVAL OF BOARD MEMBERS. The governor may only remove
2 a member of the board for good cause.

3 Sec. 08.63.050. POWERS AND DUTIES OF THE BOARD. The board shall

4 (1) establish objective examination requirements and training and education
5 requirements for persons who apply for a license to practice marital and family therapy;

6 (2) examine applicants and issue licenses to qualified applicants;

7 (3) establish continuing education requirements for license renewal;

8 (4) adopt a code of ethical practice for marital and family therapy;

9 (5) hold hearings and order the disciplinary sanction of a person who violates this
10 chapter or a regulation of the board;

11 (6) ensure that licensees are aware of the requirements of AS 47.17.020;

12 (7) establish standards for supervisors and supervision under this chapter;

13 (8) report annually to the governor and the department on the board's proceedings
14 each year; the report must include the number of licensure applicants, the number of
15 examinations conducted, the failure rate for each examination, a financial report, and other
16 information requested by the department;

17 (9) enforce the provisions of this chapter and adopt regulations necessary to carry
18 out its duties under this chapter.

19 Sec. 08.63.060. PROCEDURES. The Administrative Procedure Act (AS 44.62) applies
20 to regulations and proceedings under this chapter.

21 ARTICLE 2. MARITAL AND FAMILY THERAPY LICENSES.

22 Sec. 08.63.100. QUALIFICATIONS FOR LICENSE TO PRACTICE. (a) The board
23 shall issue a license to practice marital and family therapy to a person who

24 (1) applies on a form provided by the board;

25 (2) pays the fee established under AS 08.01.065;

26 (3) furnishes evidence satisfactory to the board that the person

27 (A) has not engaged in conduct that is a ground for imposing disciplinary
28 sanctions under AS 08.63.210;

29 (B) holds a master's degree or doctorate in marital and family therapy or
30 allied mental health field from a regionally accredited educational institution approved by
31 the board for which the person completed a course of study that included instruction

1 substantially equivalent to the following:

2 (i) three courses or nine semester or 12 quarter hours of course
3 work in marital and family therapy;

4 (ii) three courses or nine semester or 12 quarter hours of course
5 work in marital and family studies;

6 (iii) three courses or nine semester or 12 quarter hours of course
7 work in human development;

8 (iv) one course or three semester or four quarter hours of course
9 work in professional studies or professional ethics and law;

10 (v) one course or three semester or four quarter hours of course
11 work in research; and

12 (vi) one year of supervised clinical practice in marital and family
13 therapy;

14 (C) after receiving a degree described in (B) of this paragraph, has

15 (i) practiced marital and family therapy within three years of the
16 person's application, including 1,500 hours of direct clinical contact with couples
17 and families; and

18 (ii) been supervised in the clinical contact for at least 200 hours.
19 including 100 hours of individual supervision and 100 hours of group supervision
20 approved by the board;

21 (D) has received training related to domestic violence; and

22 (E) has passed a written or oral examination administered by the board.

23 (b) Under regulations adopted by the board, a person who holds a master's or doctorate
24 degree in marital and family therapy or allied mental health field from a regionally accredited
25 educational institution approved by the board, but whose course of degree study did not include
26 all the courses or clinical practice requirements set out in (a)(3)(B) of this section may substitute
27 post-degree courses or practice, as approved by the board, to satisfy the requirements of (a)(3)(B)
28 of this section.

29 (c) An applicant who fails an examination given under this section may not retake the
30 examination for a period of six months from the date of the examination that the applicant failed.

31 (d) A license issued under this section shall be renewed biennially by the applicant on

1 a date set by the department and approved by the board. It shall be renewed by payment of the
2 fee established under AS 08.01.065 and by satisfaction of the continuing education requirements
3 established by the board for the renewal of licenses issued under this section.

4 Sec. 08.63.110. LICENSE FOR SUPERVISED PRACTICE. (a) The board shall issue
5 a four-year license for the supervised practice of marital and family therapy to a person who
6 meets the requirements of AS 08.63.100(a)(1), (2), and (3)(A) - (B).

7 (b) A licensee under this section may practice only

8 (1) under the direct supervision of a supervisor approved by the board under
9 AS 08.63.120; and

10 (2) in a clinic, social service agency, or other setting approved by the board.

11 (c) A license for supervised practice expires four years from the date of issuance and
12 may not be renewed.

13 (d) A licensee under this section shall submit to the board for its approval a proposed
14 plan for satisfying the supervision requirements of AS 08.63.100(a)(3)(C).

15 (e) A licensee under this section shall use the title "marital therapy associate," "family
16 therapy associate," or other title that is approved by the board.

17 (f) The board shall revoke a license for supervised practice if the person fails the
18 examination required under AS 08.63.100 two or more times.

19 Sec. 08.63.120. AUTHORIZED SUPERVISORS. (a) A person may not supervise a
20 person under this chapter unless approved by the board to be a supervisor.

21 (b) A person who supervises a licensee under this section must

22 (1) have practiced marital and family therapy for five years;

23 (2) be licensed under this chapter; and

24 (3) meet the minimum standards established by the board for approved
25 supervisors.

26 Sec. 08.63.130. TEMPORARY LICENSE FOR THE PRACTICE OF MARITAL AND
27 FAMILY THERAPY. (a) The board shall issue a temporary license for the practice of marital
28 and family therapy to an applicant who satisfies the requirements of AS 08.63.100(a)(1), (2) and
29 (3)(A), (B), and (C) and has been approved by the board to take the marital and family therapy
30 examination.

31 (b) A person may practice under a temporary license until the board issues the results

1 of the first marital and family therapy examination given after issuance of the person's temporary
2 license and either issues or denies a license under AS 08.63.100 to the person.

3 (c) If a licensee under this section fails the marital and family therapy examination, the
4 board may not renew the person's temporary license.

5 Sec. 08.63.140. LICENSURE BY CREDENTIALS. The board shall issue a license to
6 practice marital and family therapy to a person who

7 (1) is licensed or certified for the practice of marital and family therapy in another
8 state that has requirements for the license or certificate that are substantially equal to or greater
9 than the requirements of this state; and

10 (2) meets the requirements of AS 08.63.100(a)(1), (2), and (3)(A).

11 ARTICLE 3. GENERAL PROVISIONS.

12 Sec. 08.63.200. CONFIDENTIALITY OF COMMUNICATION. (a) A person licensed
13 under this chapter may not reveal to another person a communication made to the licensee by
14 a client about a matter concerning which the client has employed the licensee in a professional
15 capacity. This section does not apply to

16 (1) a case conference or case consultation with other mental health professionals
17 at which the patient is not identified;

18 (2) the release of information that the client in writing authorized the licensee to
19 reveal;

20 (3) information released to the board as part of a disciplinary or other proceeding;
21 or

22 (4) situations where the rules of evidence applicable to the psychotherapist-patient
23 privilege allow the release of the information.

24 (b) Notwithstanding (a) of this section, a person licensed under this chapter shall report
25 incidents of

26 (1) child abuse or neglect as required by AS 47.17;

27 (2) harm or assaults suffered by an elderly person or disabled adult as required
28 by AS 47.24.

29 (c) Information obtained by the board under (a)(3) of this section is confidential and is
30 not a public record for purposes of AS 09.25.110 - 09.25.140.

31 Sec. 08.63.210. GROUNDS FOR IMPOSITION OF DISCIPLINARY SANCTIONS.

1 After a hearing, the board may impose a disciplinary sanction under AS 08.01.075 on a person
2 licensed under this chapter when the board finds that the person

3 (1) secured a license through deceit, fraud, or intentional misrepresentation;

4 (2) engaged in deceit, fraud, or intentional misrepresentation in the course of
5 providing professional services or engaging in professional activities;

6 (3) advertised professional services in a false or misleading manner;

7 (4) has been convicted of a felony or of another crime that affects the person's
8 ability to practice competently and safely;

9 (5) failed to comply with a provision of this chapter or a regulation adopted under
10 this chapter, or an order of the board;

11 (6) continued to practice after becoming unfit due to

12 (A) professional incompetence;

13 (B) addiction or severe dependency on alcohol or another drug that impairs
14 the person's ability to practice safely;

15 (7) engaged in unethical conduct in connection with the delivery of professional
16 services to clients.

17 Sec. 08.63.220. LICENSE REQUIRED IF DESIGNATION USED. A person who is not
18 licensed under this chapter or whose license is suspended or revoked, or whose license has
19 lapsed, who knowingly uses in connection with the person's name the words or letters
20 "L.M.F.T.," "L.M.F.C.," "Licensed Marital and Family Therapist," "Licensed Marriage and
21 Family Counselor," or other letters, words, or insignia indicating or implying that the person is
22 licensed as a marital and family therapist by this state or who in any way, orally or in writing,
23 directly or by implication, knowingly holds out as being licensed by the state as a marital and
24 family therapist in this state is guilty of a class B misdemeanor.

25 Sec. 08.63.900. DEFINITIONS. In this chapter, unless the context indicates otherwise,

26 (1) "advertise" includes issuing or causing to be distributed a card, sign or device
27 to a person, or causing, permitting, or allowing a sign or marking on or in a building or structure,
28 or in a newspaper, magazine, or directory, or on radio or television, or using other means
29 designed to secure public attention;

30 (2) "board" means the Board of Marital and Family Therapy;

31 (3) "course" means a class of at least three credit hours in a graduate program at

1 an accredited educational institution or an institution approved by the board;

2 (4) "department" means the Department of Commerce and Economic
3 Development;

4 (5) "practice of marital and family therapy" means the diagnosis and treatment
5 of mental and emotional disorders that are referenced in the standard diagnostic nomenclature for
6 marital and family therapy, whether cognitive, affective, or behavioral, within the context of
7 human relationships, particularly marital and family systems; marital and family therapy involves

8 (A) the professional application of assessments and treatments of
9 psychotherapeutic services to individuals, couples, and families for the purpose of treating
10 the diagnosed emotional and mental disorders;

11 (B) an applied understanding of the dynamics of marital and family
12 interactions, along with the application of psychotherapeutic and counseling techniques
13 for the purpose of resolving intrapersonal and interpersonal conflict and changing
14 perceptions, attitudes, and behaviors in the area of human relationships and family life;

15 (6) "supervision" means face-to-face consultation, direction, review, evaluation,
16 and assessment of the practice of the person being supervised, including direct observation and
17 the review of case presentations, audio tapes, and video tapes.

18 * Sec. 2. AS 08.01.010 is amended by adding a new paragraph to read:

19 (33) Board of Marital and Family Therapy (AS 08.63.010).

20 * Sec. 3. AS 08.02.010(a) is amended to read:

21 (a) An acupuncturist licensed under AS 08.06, an audiologist licensed under AS 08.11,
22 a person licensed in the state as a chiropractor under AS 08.20, a dentist under AS 08.36, a
23 marital and family therapist licensed under AS 08.63, a medical practitioner or osteopath
24 under AS 08.64, a registered nurse under AS 08.68, an optometrist under AS 08.72, a registered
25 pharmacist under AS 08.80, a physical therapist or occupational therapist licensed under AS 08.-
26 84, a psychologist under AS 08.86, or a clinical social worker licensed under AS 08.95, shall use
27 as professional identification appropriate letters or a title after that person's name which repre-
28 sents that person's specific field of practice. The letters or title shall appear on all signs,
29 stationery, or other advertising in which the person offers or displays personal professional
30 services to the public. In addition, a person engaged in the practice of medicine or osteopathy
31 under AS 08.64.380 or a person engaged in any manner in the healing arts who diagnoses, treats,

1 tests, or counsels other persons in relation to human health or disease and uses the letters "M.D."
2 or the title "doctor" or "physician" or another title that tends to show that the person is willing
3 or qualified to diagnose, treat, test, or counsel another person, shall clarify the letters or title by
4 adding the appropriate specialist designation, if any, such as "dermatologist", "radiologist",
5 "audiologist", "naturopath", or the like.

6 * Sec. 4. AS 08.03.010(c) is amended by adding a new paragraph to read:

7 (23) Board of Marital and Family Therapy (AS 08.63.010) -- June 30, 1993.

8 * Sec. 5. AS 44.62.330(a) is amended by adding a new paragraph to read:

9 (57) Board of Marital and Family Therapy (AS 08.63.010).

10 * Sec. 6. AS 47.17.290(13) is amended to read:

11 (13) "practitioner of the healing arts" includes chiropractors, mental health
12 counselors, dental hygienists, dentists, health aides, nurses, nurse practitioners, occupational
13 therapists, occupational therapy assistants, optometrists, osteopaths, naturopaths, physical thera-
14 pists, physical therapy assistants, physicians, physician's assistants, psychiatrists, psychologists,
15 psychological associates, audiologists licensed under AS 08.11, hearing aid dealers licensed under
16 AS 08.55, marital and family therapists licensed under AS 08.63, religious healing
17 practitioners, acupuncturists, and surgeons;

18 * Sec. 7. AS 47.24.010(a) is amended to read:

19 (a) The following persons who, in the performance of their professional duties, have
20 reasonable cause to believe that an elderly person has suffered harm shall, not later than 24 hours
21 after first having cause for the belief, report the harm to the Department of Health and Social
22 Services:

23 (1) a physician or other licensed health care provider;

24 (2) a mental health professional as defined in AS 47.30.915(11) and including
25 a marital and family therapist licensed under AS 08.63;

26 (3) a pharmacist;

27 (4) an administrator of a nursing home, residential care or health care facility;

28 (5) a guardian or conservator;

29 (6) a police officer;

30 (7) a village public safety officer;

31 (8) a village health aide;

- 1 (9) a social worker;
2 (10) a member of the clergy;
3 (11) a staff employee of a project funded by the Older Alaskans Commission;
4 (12) an employee of a homemaker program or home health aide program;
5 (13) an emergency medical technician or a paramedic in the mobile intensive care
6 program.

7 * Sec. 8. AS 47.24.110(a) is amended to read:

8 (a) The following persons who, in the performance of their professional duties, have
9 reasonable cause to believe that a disabled adult is a victim of assault under AS 11.41.200 -
10 11.41.230 or sexual assault under AS 11.41.410 - 11.41.420, and that the disabled adult is unable
11 to report the crime, shall promptly report the crime to the nearest law enforcement agency:

- 12 (1) a physician or other licensed health care provider;
13 (2) a mental health professional as defined in AS 47.30.915 and including a
14 marital and family therapist licensed under AS 08.63;
15 (3) a pharmacist;
16 (4) an administrator or employee of a nursing home, residential care, or health
17 care facility;
18 (5) a caretaker of the disabled adult;
19 (6) a guardian or conservator of the disabled adult;
20 (7) a police officer as defined in AS 18.65.290;
21 (8) a village public safety officer;
22 (9) a village health aide;
23 (10) a social worker;
24 (11) a member of the clergy;
25 (12) a staff employee of a program or project serving disabled adults;
26 (13) a licensed foster care provider;
27 (14) a paid employee of a domestic violence and sexual assault program or a
28 crisis intervention and prevention program as defined in AS 18.66.900;
29 (15) an employee of a homemaker program or home health aide program;
30 (16) an emergency medical technician or paramedic in the mobile intensive care
31 program.

1 * Sec. 9. Alaska Rule of Evidence 504(a) is amended to read:

2 (a) DEFINITIONS. As used in this rule:

3 (1) A patient is a person who consults or is examined or interviewed by a
4 physician or psychotherapist.

5 (2) A physician is a person authorized to practice medicine in any state or nation,
6 or reasonably believed by the patient so to be.

7 (3) A psychotherapist is (A) a person authorized to practice medicine in any state
8 or nation, or reasonably believed by the patient so to be, while engaged in the diagnosis or
9 treatment of a mental or emotional condition, including alcohol or drug addiction, [OR] (B) a
10 person licensed or certified as a psychologist or psychological examiner under the laws of any
11 state or nation or reasonably believed by the patient to so be, while similarly engaged, or (C) a
12 person licensed as a marital or family therapist under the laws of a state or nation or
13 reasonably believed by the patient to so be, while similarly engaged.

14 (4) A communication is confidential if not intended to be disclosed to third
15 persons other than those present to further the interest of the patient in the consultation,
16 examination, or interview, or persons reasonably necessary for the transmission of the
17 communication, or persons who are participating in the diagnosis and treatment under the
18 direction of the physician or psychotherapist, including members of the patient's family.

19 * Sec. 10. INITIAL APPOINTMENTS. (a) In making the initial appointments of professional
20 members to the Board of Marital and Family Therapy, the governor shall consider a person licensed for
21 the purpose of AS 08.63.010, added by sec. 1 of this Act, if the person would be entitled to a license
22 under sec. 11 of this Act. The Board of Marital and Family Therapy shall issue a license to practice
23 marital and family therapy to the professional members appointed under this section.

24 (b) A license issued under this section is subject to the same renewal requirements as a license
25 issued under AS 08.63.100, added by sec. 1 of this Act.

26 (c) The initial appointments to the board shall be staggered as provided in AS 39.05.055.

27 * Sec. 11. TRANSITIONAL LICENSING. (a) Notwithstanding AS 08.63.100, added by sec. 1 of
28 this Act, the Board of Marital and Family Therapy shall issue a license to practice marital and family
29 therapy to a person who

30 (1) applies for a license before July 1, 1993;

31 (2) satisfies the requirements of AS 08.63.100(a)(1) - (3)(A), added by sec. 1 of this Act;

1 (3) holds a master's or doctorate degree from an accredited educational institution either
2 in

3 (A) marital and family therapy or another mental health field; or

4 (B) an appropriate course of study approved by the board; and

5 (4) has practiced marital and family therapy in the state for at least two years preceding
6 application.

7 (b) A license under this section is subject to the same renewal requirements as a license issued
8 under AS 08.63.100, added by sec. 1 of this Act.

9 (c) The Board of Marital and Family Therapy shall liberally construe the requirements of (a) of
10 this section for the purposes of licensing as a marital and family therapy professional every person who
11 merits licensing by virtue of the person's education, training, and experience in the field of marital and
12 family therapy.

BILL: HB 18 SHORT TITLE: MARRIAGE & FAMILY THERAPISTS
NAME: CSHB 18(FIN)
TITLE: "AN ACT REGULATING THE PRACTICE OF MARITAL AND FAMILY THERAPY; AND
AMENDING ALASKA RULE OF EVIDENCE 504(A)(3)."

SPONSOR(S): REPRESENTATIVE(S) GRUENBERG, M.A. MILLER, CARNEY, B. DAVIS

CURRENT STATUS: RETURN TO (H) HES STATUS DATE: 02/19/92
THEN RLS

HEARING: (H) HES MAR 10 08:30 AM

01/11/91	20	(H)	PREFILE RELEASED
01/21/91	20	(H)	READ THE FIRST TIME - REFERRAL(S)
01/21/91	20	(H)	HES, JUDICIARY, FINANCE
02/19/91	261	(H)	COSPONSOR(S): M.A. MILLER
02/20/91	272	(H)	HES RPT CS(HES) NEW TITLE 4DP
02/20/91	272	(H)	(DP-CARNEY, LINCOLN, M.A. MILLER, HANLEY)
02/20/91	272	(H)	-FISCAL NOTE (DCED) 2/20/91
03/13/91	457	(H)	JUD RPT CS(JUD) NEW TITLE 5DP
03/13/91	457	(H)	(DP-DONLEY, GRUENBERG, MARTIN, HANLEY,
03/13/91	457	(H)	..PARNELL)
03/13/91	457	(H)	-PREV FN (DCED) 2/20/91
04/17/91	828	(H)	FIN RPT CS(FIN) NEW TITLE 9DP 2NR
04/13/91	829	(H)	(DP-MACLEAN, NAVARRE, BOYER, KOPONEN,
04/13/91	829	(H)	..JACKO, R. PHILLIPS, LARSON, ULMER, BROWN)
04/13/91	829	(H)	(NR-SHARP, BARNES)
04/17/91	829	(H)	-PREV FN (DCED) 2/20/91
04/17/91		(H)	RULES TO CALENDAR 4/17/91
04/17/91	840	(H)	READ THE SECOND TIME
04/17/91	840	(H)	FIN CS ADOPTED UNAN CONSENT
04/17/91	840	(H)	AMENDMENT 1 BY BARNES
04/17/91	841	(H)	AM NO 1 FAILED Y16 N20 A4
04/17/91	841	(H)	ADVANCED TO THIRD RDG FLD Y26 N13 A1
04/17/91	842	(H)	ADVANCE TO THIRD READING 4/19 CALENDAR
04/19/91	877	(H)	READ THE THIRD TIME CSHB 18(FIN)
04/19/91	877	(H)	RETURN TO RLS COMMITTEE
04/19/91	881	(H)	COSPONSOR(S): B. DAVIS
02/19/92		(H)	RULES TO CALENDAR 2/19/92
02/19/92	2343	(H)	READ THE THIRD TIME CSHB 18(FIN)
02/19/92	2343	(H)	FISCAL NOTE SUBMITTED BY H.RLS CMTE
02/19/92	2343	(H)	-FISCAL NOTE (DCED) 2/19/92
02/19/92	2343	(H)	RETURN TO SECOND FOR AM 1 UNAN CONSENT
02/19/92	2343	(H)	AM 1 BY GRUENBERG
02/19/92	2346	(H)	MOTION: RETURN TO RULES
02/19/92	2346	(H)	..MOTION WITHDRAWN
02/19/92	2346	(H)	RETURN TO HES COMMITTEE

HB 18 Bill History

NAME: HCS CSSB 40(FIN)
TITLE: "AN ACT REGULATING THE PRACTICE OF MARITAL AND FAMILY THERAPY AND AMENDING ALASKA RULE OF EVIDENCE 504(A)(3)."

SPONSOR(S): SENATOR(S) PEARCE, MENARD; REPRESENTATIVE(S) GRUENBERG, M.A. MILLER
B. DAVIS

CURRENT STATUS: VETOED BY GOVERNOR

STATUS DATE: 06/21/91

01/11/91	30	(S)	PREFILE RELEASED
01/21/91	30	(S)	READ THE FIRST TIME - REFERRAL(S)
01/21/91	30	(S)	HES, THEN JUDICIARY, FINANCE
01/22/91	53	(S)	COSPONSOR ADDED: MENARD
03/01/91	410	(S)	JUD REFERRAL WAIVED
03/01/91	410	(S)	L&C REFERRAL ADDED
03/27/91	682	(S)	HES RPT CS 2DF 3NR NEW TITLE
03/27/91	693	(S)	FISCAL NOTE TO SB & CS PUBLISHED (DCED)
03/27/91	693	(S)	L&C REFERRAL WAIVED
04/17/91	888	(S)	FIN RPT CS 4DF NEW TITLE
04/17/91	888	(S)	FISCAL NOTE TO CS PUBLISHED (DCED)
04/17/91	888	(S)	LETTER OF INTENT WITH FIN REPORT
04/17/91	903	(S)	RULES TO SUP CALENDAR 4/17/91
04/17/91	905	(S)	READ THE SECOND TIME
04/17/91	905	(S)	FIN CS ADOPTED UNAN CONSENT
04/17/91	905	(S)	ADVANCED TO THIRD READING UNAN CONSENT
04/17/91	905	(S)	READ THE THIRD TIME CSSB 40(FIN)
04/17/91	905	(S)	(S) ADOPTED FIN LETTER OF INTENT
04/17/91	906	(S)	PASSED Y16 N3 E- A1
04/17/91	906	(S)	COURT RULE VOTE SAME AS PASSAGE
04/17/91	906	(S)	ADAMS NOTICE OF RECONSIDERATION
04/19/91	936	(S)	RECON TAKEN UP - IN THIRD READING
04/19/91	936	(S)	PASSED ON RECONSIDERATION Y16 N3 E1
04/19/91	937	(S)	COURT RULE VOTE SAME AS PASSAGE
04/19/91	938	(S)	TRANSMITTED TO (H) W/LETTER OF INTENT
04/22/91	892	(H)	READ THE FIRST TIME - REFERRAL(S)
04/22/91	893	(H)	HES, JUDICIARY, FINANCE
04/22/91	916	(H)	CROSS SPONSORS(S): GRUENBERG, M.A. MILLER
05/02/91	1108	(H)	HES REFERRAL WAIVED
05/06/91	1153	(H)	JUD REFERRAL WAIVED
05/15/91	1417	(H)	FIN RPT HCS(FIN) 8DF 2NR
05/15/91	1417	(H)	S FIN LETTER OF INTENT WITH FIN REPORT
05/15/91	1417	(H)	-PREV SEN FN (DCED) 4/17/91
05/15/91		(H)	RULES TO CALENDAR 5/16/91
05/16/91	1512	(H)	READ THE SECOND TIME
05/16/91	1513	(H)	FIN HCS ADOPTED UNAN CONSENT
05/16/91	1513	(H)	ADVANCED TO THIRD READING UNAN CONSENT
05/16/91	1513	(H)	READ THE THIRD TIME HCS CSSB 40(FIN)
05/16/91	1514	(H)	PASSED Y40 N-
05/16/91	1514	(H)	COURT RULE CHANGE SAME AS PASSAGE
05/16/91	1514	(H)	(H) ADOPTED S FIN LETTER OF INTENT
05/16/91	1528	(H)	TRANSMITTED TO (S) AS AMENDED
05/17/91	1380	(S)	ADOPTED LEGISLATIVE LETTER OF INTENT
05/17/91	1379	(S)	CONCUR AM OF (H) Y14 N2 E1 A3
05/17/91	1380	(S)	COURT RULE VOTE SAME AS PASSAGE
05/17/91	1558	(H)	CROSS SPONSOR(S): B. DAVIS
06/19/91	1699	(S)	1:30 PM 5/30/91 TRANSMITTED TO GOVERNOR
07/09/91	1715	(S)	VETOED BY GOVERNOR 6/21/91

SB 40 Bill History

HB

20

Box 71932
Fairbanks, 99707

Representative Bert Sharp
Alaska State Legislature
Box V, Juneau 99811

February 7, 1991

Dear Bert:

Thanks for sending me a copy of HB 20 last week. I really appreciate your work in attempting to correct an injustice affecting those oldtimers who are paying their own way.

In case it will help to support your work, I'll recap my experience with this quirk in the longevity program -- I don't expect that you can remember the details of our conversation some months ago. Basically, I was shocked when Mom said Dad's monthly bonus was cut off automatically when he entered Denali Center in March of 1989. Frankly, I couldn't and didn't believe it, since they were paying their own way, and not getting federal or state assistance. (My understanding was that Denali Center told Mom the bonus would be terminated, and that she didn't get an official letter from the State, but I might be wrong.)

At that time the family was in a turmoil, facing the crisis of making a major change and hardly in a position to combat a bureaucratic nightmare on top of everything else. Dad's health -- the onset of Alzheimer's -- had been deteriorating for four, six, or more years. What had appeared to be normal forgetfulness at age 90 slowly changed into something more serious, until the Alzheimer's was finally diagnosed in '88 or so. Mom did well caring for him for several years, but his increasing incapacity to assist eventually brought her to the point of admitting he needed to move to a home where he could get more assistance. (I would note that the home health care and other assistance were a great help, and prolonged the move to a full-time care facility.)

Even though he'd been a resident of Alaska for over 60 years (and served Governor Hickel as the first manager of the Fairbanks Pioneer Home, c. 1967 - 1971) he was unable to get into the local Home, or others throughout the State. Although she considered placing him in a nursing home Outside, in large due to costs, Mom felt it best to try to keep him here among friends and family. Hence the move to Denali Center.

The cost there was \$175.00 per day, and he was ineligible for Medicare or Medicaid (whichever) because Alzheimer's isn't a "covered" illness. Looking back, the next eight months were pretty much a nightmare as the illness progressed. I did make some local inquiries as to why the longevity had been cut off, but remained unsatisfied with the answers. Had the State, or even the federal government, been assisting the folks financially, it would not have seemed so unreasonable for them to have lost the \$250 per month. Throughout those months until he

MISC CORRESP.

died in November, 1989, the folks paid all the bills -- totaling around \$40,000 or more.

By early 1990 I had read the law and so on, but still couldn't understand why entry into any nursing home, even without any governmental assistance, meant the loss of the longevity bonus. I finally called Juneau and spoke with Mr. David Teal, who convincingly confirmed that the Legislature had in fact amended the program in that way several years ago. He also suggested that a simple change in the wording would restore the benefits, at least in some cases. That led to our conversation, when you advised you were already aware of the situation and hoped to be able to correct it.

In many respects this is a matter of principle. When you're looking at a daily cost of \$175 or monthly expense of \$5,250, the \$250 longevity bonus seems almost insignificant. But that's \$3000 per year, and better than nothing. Mainly, there's a psychological blow in losing the bonus, at a time when the individuals involved are suffering enough.

From what I recall of the conversation with Mr. Teal, the correcting language would only restore the bonus to a limited group of people. Otherwise, the intricacies of Medicaid/Medicare would serve to defeat the purpose of the financial increase. The fact that only a few people would be helped can be viewed positively, as the correction would thus not impose a major burden on the State treasury.

In closing, I strongly believe that people who are in nursing homes (especially privately operated homes) paying their own way and not eligible for other federal or State subsidy, should be entitled to the longevity bonus. Thanks again for your efforts on behalf of those oldtimers who may benefit from a technical change in the law.

Sincerely,

Jim Moody

8/

Alaska State Legislature

REPRESENTATIVE
BERT SHARP

DISTRICT 20

MEMBER
FINANCE COMMITTEE

FINANCE SUBCOMMITTEES
GOVERNOR
FISH AND GAME
LABOR



FAIRBANKS
119 N CUSHMAN
FAIRBANKS ALASKA 99701
(907) 452-7885 7886

WHILE IN JUNEAU

PO BOX V
STATE CAPITOL
JUNEAU ALASKA 99811
(907) 465-3004/3018

House of Representatives

MEMORANDUM

RECEIVED
APR 19 A.M.

TO: Representative Georgianna Lincoln, Co-Chairman
Health & Social Services Committee

Representative Pat Carney, Co-Chairman
Health & Social Services Committee

FROM: Representative Bert Sharp

DATE: April 19, 1991

SUBJ: Hearing request, CS SS HB20

In 1984, the federal government decided that it would count the longevity bonus as income for purposes of medicaid eligibility determinations. One result of that change would have been the loss of medicaid coverage of nursing home costs to some older Alaskans.

In 1985, the legislature changed its laws making all nursing home residents ineligible for longevity bonus payments. This blanket exclusion did not take into consideration senior citizens who pay for the cost of care at a nursing home from private sources. HB20 corrects this oversight.

After holding several teleconferences, State Affairs has unanimously passed CS SS HB20 out of committee. The committee substitute removes the word "nongovernmental" to eliminate confusion as to federal or state retirement benefit payments.

I respectfully request a hearing be scheduled as soon as possible for the committees' consideration of CS SS HB 20.



REPRESENTING
GOLDEN HEART
OF ALASKA

Sponsor Statement

ALASKA NURSING HOMES CENSUS

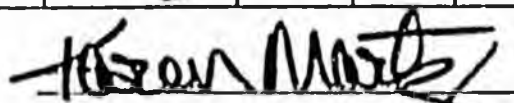
AS OF : November 30, 1990

*Actual numbers separating private pay from other is not available. However, numbers are believed to be small.

FACILITY	MEDICAID PER DIEN RATE	CERTIFIED CAPACITY		MEDICAID/GRH PLACEMENTS		NON-DHA PLACEMENTS		TOTAL CENSUS	VACANT BEDS	% OCCUPANCY OF TOTAL BEDS	
		SNF/ICF	SWING BEDS	ICF	SNF	MEDI-CARE	OTHER**			OVERALL	MEDICAID
CORDOVA HOSPITAL LTC	\$282.90	10	4	12	0	n/a	0	12	2	86%	86%
UENALI CENTER (Fairbanks)	200.34	101	0	38	0	7	8	61	40	60%	46%
HERITAGE PLACE (Soldotna)	207.30	45	0	21	2	4	5	32	13	71%	51%
ISLAND VIEW MANOR (Ketchikan)	237.70	46	0	18	3	2	5	28	18	61%	46%
KOTZEBUE SENIOR CITIZEN CARE CTR.	189.27	9	0	6	2	0	0	8	1	89%	89%
KODIAK ISLAND HOSPITAL LTC	217.34	19*	4	14	n/a	0	3	17	6	74%	61%
MARY CONRAD CENTER (Anchorage)	290.37	73*	0	70	n/a	n/a	2	72	1	99%	96%
OUR LADY OF COMPASSION (Anchorage)	178.59	224	0	139	46	8	27	220	4	98%	83%
PETERSBURG HOSPITAL LTC	251.18	14	4	10	0	0	2	12	6	67%	56%
QUYMAHA CARE CENTER (Nome)	235.38	15*	0	15	n/a	n/a	0	15	0	100%	100%
SOURDOUGH PLACE (Valdez)	207.06	16*	0	10	n/a	n/a	3	13	3	81%	63%
SOUTH PENINSULA HOSP. LTC (Homer)	234.82	18	4	14	1	n/a	2	17	5	77%	68%
ST. ANN'S NURSING HOME (Juneau)	210.62	45	0	35	7	0	1	43	2	96%	93%
WESLEYAN NURSING HOME (Seward)	164.52	66	0	40	0	n/a	6	46	20	70%	61%
WRANGELL GENERAL HOSPITAL LTC	284.80	14	4	9	1	0	2	12	6	67%	56%
SWING BEDS (Acute to LTC):											
CENTRAL PEN. HOSPITAL (Soldotna)	181.75	0	4	0	0	1	0	1	3	25%	0%
SEWARD GENERAL HOSPITAL	177.51	0	2	0	0	0	0	0	2	0%	0%
SITKA COMMUNITY HOSPITAL	181.75	0	2	0	0	2	0	2	0	100%	0%
VALDEZ COMMUNITY HOSPITAL	181.75	0	4	2	0	0	0	2	2	50%	50%
VALLEY HOSPITAL (Palmer)	181.75	0	4	0	0	0	1	1	3	25%	0%
TOTAL:			751	453	70	24	*67	614	137	82%	70%

* - beds certified ICF only.
 ** - includes VA, private pay, insurance, and other.

NOTE: Retro rate for Heritage Place effective 7/1/90.


 KAREN HARTZ
 DIVISION OF MEDICAL ASSISTANCE (907) 561-2171
 1/9/91
 DATE

Alaska Nursing Home Census

PRIVATE PAY/INSURANCE RESIDENTS IN NURSING HOMES
FY 91

Facility	Number of Private/Insurance Pay Residents
Island View Manor	5
Kodiak Island Nursing Home	3
Petersburg Hospital	5
South Peninsula Hospital	1
St. Ann's Nursing Home	3
Wesleyan Nursing Home	8
Denali Center	7
Our Lady of Compassion Care Center	4
Nome	0
Kotzebue	0
TOTAL	36

Telephone survey conducted by the Division of Pioneers' Benefits on February 13-14, 1991.

PRIVATE PAY nursing home residents in 1990-91.

d\wp\misc\shb20fn

private pay nursing home residents

STATE OF ALASKA
THE LEGISLATURE

LEGISLATIVE AFFAIRS AGENCY

REP. SHARP
JAN 08 1989

RECEIVED

POUCH Y STATE CAPITOL
JUNEAU ALASKA 99801
907 465 3820

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MEMORANDUM

January 9, 1990

SUBJECT: Longevity bonus payments for nursing home residents (W.O. No. 16-1887)

TO: Representative Bert Sharp

FROM: Tamara Brandt Cook *TBC*
Director
Division of Legal Services

You have asked for a draft that would amend AS 47.45.070 to permit a resident of a nursing home to receive longevity bonus payments if the nursing home care is not paid for through the federal medicare or medicaid program. It is my understanding that you may want to incorporate this into HB 382 through a committee or sponsor substitute, but for purposes of discussion with state and, perhaps, federal agencies I thought you might prefer a draft just setting out the amendment to AS 47.45.070.

Nursing home residents were excluded from the longevity bonus because the federal government decided in 1984 that it would count the bonus as income for purposes of medicaid eligibility determinations, at least for those Alaskans who were not 65 before October 1, 1985, and did not have 25 years of state residency by that date, as was required under the original longevity bonus program. (See 42 USC 1382a(b)(2)(B)) One result of that federal change would have been to make some older Alaskans ineligible for medicaid coverage of their nursing home costs. To protect these people, the legislature imposed a blanket disqualification of all nursing home residents under the longevity bonus program.

From a constitutional standpoint, the disqualification of nursing home residents from receiving longevity bonus payments raises an equal protection question. Looking at the longevity bonus program in isolation, without regard to medicaid eligibility, there appears to be no rational relation between the purposes of the longevity bonus program

- legal services corresp.

Representative Bert Sharp

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January 9, 1990

and one's status as a nursing home resident. So the existing statute may already be unconstitutional.

The next question, the one which your request poses, is whether the legislature can constitutionally carve out an exception so that some nursing home residents again become eligible for the longevity bonus. Put another way, can the legislature discriminate against certain nursing home residents by continuing to disqualify them for the longevity bonus? That is, can the legislature discriminate against certain nursing home residents under the longevity bonus program in order to benefit them under a different program (medicaid)?

The issue appears to be a novel one. I was unable to locate any case law relating to the issue of discriminating against a class of persons in order to benefit them. Perhaps the reason there are few cases of this type is that members of such discriminated classes do not feel they are being harmed by the discrimination, and so those matters are rarely litigated. It seems to me that a legal argument can be made to support carving out an exception for the nursing home residents. Arguably, the longevity bonus program should not have to be viewed in isolation; rather, it should be seen in the context of other government programs aimed at reaching the same populations. Why, for example, shouldn't the legislature be permitted, in its wisdom, to tailor the longevity bonus program in a way that maximizes the overall benefits (state and federal) to all nursing home residents in the state? Such "discrimination" is not invidious. It is rational, well-intentioned, and consistent with the state's mandate to provide for the health and welfare of its citizens. Whether this argument would succeed is speculative, however.

The federal government, of course, will spot the subterfuge. They may take the position that the state is discriminating unfairly against medicaid recipients, simply because they are medicaid recipients. Or the federal government could use the state's argument to justify its own treatment of Alaska nursing home residents differently from nursing home residents of other states: as soon as they are cut off from federal benefits they qualify for state benefits, so different treatment with respect to federal benefits does not amount to prohibited discrimination. The risk is that either view could provide grounds for cutting off medicaid funding to the state.

Representative Bert Sharp
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January 9, 1990

Gordon Landes of the division of medical assistance, Department of Health and Social Services, advised Mr. Ed Hein of our office some time ago that the federal government has never said in writing what would happen or how they would respond if the state attempted to discriminate against medicaid recipients in order to avoid the state's having to pick up the tab for their nursing home costs. He thought it might be worth asking them for a written opinion. I believe that it will be necessary to work in cooperation with the federal government on this legislation in order to avoid the possibility that the federal government will reduce benefits to state citizens once a bill is enacted.

TBC:gc
G13/014

HOUSE COMMITTEE REPORT

(7)

Date Referred: April 19, 1991

FURTHER REFERRALS:

Finance

Date of Committee Action: 5-6-91

The HEALTH, EDUCATION AND SOCIAL SERVICES Committee considered:

SSH 20

SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 20

LONGEVITY BONUS/NURSING HOME RESIDENTS

"An Act relating to qualifications for longevity bonus payments; and providing for an effective date."

RECOMMENDATIONS:

be replaced with CS SS HB 20 (STA) the same title
 a new title

have attached amendments(s)

do pass

do not pass

no recommendations

individual recommendations

additional referral to the _____ Committee

ADOPTS: _____ letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept)

APPROVES PREVIOUS: (Dept/Date)

fiscal impact DOA

fiscal note(s) _____

zero fiscal note _____

zero fiscal note(s) DHSS 2/25/91

SIGNING DQ PASS	DP	OTHER RECOMMENDATIONS	DNP	NR	AM
Mary Miller	✓				
John E. Longaba	✓	(GONZALES)			
Paul [unclear]	✓	(CARNEY)			
[unclear]	✓	(LINCOLN)			

[Signature]
 CO-CHAIRMAN'S SIGNATURE (LINCOLN)

Revision Date: May 2, 1991
 Title: LB Qualifications
 Sponsor: Representative Sharp
 Requestor: Representative Sharp

Department Affected: Administration
 BRU: Longevity Bonus, Pioneers' Benefits
 Component: Grants

COMPONENT SERIAL NO.

2	6		
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES	0	0	0	0	0	0
TRAVEL	0	0	0	0	0	0
CONTRACTUAL	0	0	0	0	0	0
SUPPLIES	0	0	0	0	0	0
EQUIPMENT	0	0	0	0	0	0
LAND & STRUCTURES	0	0	0	0	0	0
GRANTS, CLAIMS	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0
MISCELLANEOUS	0	0	0	0	0	0
TOTAL OPERATING	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0

CAPITAL	0	0	0	0	0	0
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REVENUE	0	0	0	0	0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0
FEDERAL FUNDS	0	0	0	0	0	0
OTHER	0	0	0	0	0	0
TOTAL	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.)
 See attached.

Prepared by: Barbara Bathony *Barbara Bathony*
 Division: Pioneers' Benefits

Phone: 465-4400
 Date: May 2, 1991

Approved by Commissioner: Millet Keller *Millet Keller*
 Agency: Administration

Date: 5/2/91

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

Fiscal Note
Committee Substitute for Sponsor Substitute HB 20

May 1, 1991

The Committee substitute removed the word "nongovernmental" from line 7 page 1. This will not effect the fiscal note. Medicare and Veterans Long Term Care benefits are still considered governmental benefits under this substitute.

There are 28 nursing home residents qualified under the sponsor substitute HB 20 in FY 91. This information was collected via a telephone survey of private long-term care facilities conducted February 1991. These 28 nursing home residents are non-medicaid, non- medicare, non-veterans, but their cost is paid for entirely by private pay or by insurance policies. It is estimated that about 80% of the private pay residents are 65 years old and over. (80% of 35 residents equals 28 Alaskans qualified under this bill)

The cost of adding 28 nursing home residents to the program is \$84,000 for FY 92.

(in 1,000s)

	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
Number of Nursing Home residents	28	28	28	28	28	28
Cost of Longevity Bonus	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0	\$84.0

The above calculation does not include the residents of the Pioneers' Homes or the Sourdough unit in Harborview, Valdez. Care for residents in these facilities is partially paid for by governments.

PRIVATE PAY/INSURANCE RESIDENTS IN NURSING HOMES
FY 91

Facility	Number of Private/Insurance Pay Residents
Island View Manor	5
Kodiak Island Nursing Home	3
Petersburg Hospital	5
South Peninsula Hospital	1
St. Ann's Nursing Home	3
Wesleyan Nursing Home	8
Denali Center	7
Our Lady of Compassion Care Center	4
Nome	0
Kotzebue	0
TOTAL	36

Telephone survey conducted by the Division of Pioneers' Benefits on February 13-14, 1991.

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. SSHB No. 20

Revision Date: 2/25/91 Department Affected: Health and Social Services
 Title: An Act Relating to Qualifications for longevity BRU: Medicaid
bonus payments; and providing for an effective date Component: Medicaid Facilities
 Sponsor: Sharp
 Requestor: _____ COMPONENT SERIAL NO 0-2-3-0

Expenditures/Revenues: Thousands of Dollars

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES	0	0	0	0	0	0
TRAVEL	0	0	0	0	0	0
CONTRACTUAL	0	0	0	0	0	0
SUPPLIES	0	0	0	0	0	0
EQUIPMENT	0	0	0	0	0	0
LAND & STRUCTURES	0	0	0	0	0	0
GRANTS CLAIMS	0	0	0	0	0	0
MISCELLANEOUS	0	0	0	0	0	0
TOTAL OPERATING	0.00	0.00	0.00	0.00	0.00	0.00

CAPITAL	0	0	0	0	0	0
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REVENUE	0	0	0	0	0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND	0	0	0	0	0	0
FEDERAL FUNDS	0	0	0	0	0	0
OTHER	0	0	0	0	0	0
TOTAL	0.00	0.00	0.00	0.00	0.00	0.00

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.)

See attached note

Prepared By: Kimberly B. Busch Phone: 465-3355
 Division: Medical Assistance Date: 2-25-91

Approved by Commissioner: [Signature]
 Agency: Health and Social Services Date: 2/25/91
 Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, QMB, & Impact Agency(ies).

SS HB 20

SSHB 20 would have no effect on the Medicaid budget, nor would it affect expenditures in the longevity bonus hold-harmless program (0231), as no bonus payment would be made to persons whose cost of care was being paid in whole or in part by Medicaid.

Industry sources estimate that there may be about 31 private pay individuals in private (non-Pioneers' Homes) nursing homes at any given point. From data about Medicaid recipients, we would reason that at least half of these may meet the age and residency requirement of the bonus program. Presumably, monthly bonus income would assist them in meeting the costs of their care or continuing premiums for a private long-term-care insurance policy. However, the costs of nursing home care are so high in comparison to the bonus payment that we do not anticipate that bonus income would reduce Medicaid expenditures by noticeably delaying a private pay patients' entry into the Medicaid program.