

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Health Policy

BILL: SB 1388

INTRODUCER: Senator Montford

SUBJECT: Registered Interns in Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling

DATE: March 28, 2014 **REVISED:** _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Sanford</u>	<u>Hendon</u>	<u>CF</u>	Favorable
2.	<u>Looke</u>	<u>Stovall</u>	<u>HP</u>	Pre-meeting
3.	_____	_____	<u>AP</u>	_____

I. Summary:

SB 1388 updates and revises provisions in ch. 491, F.S., which regulates interns in the fields of clinical social work, marriage and family therapy, and mental health. Internship status is designed in these professions to allow candidates for licensure to meet the clinical experience requirements of the license. The bill:

- Requires that a licensed mental health professional be on the premises when clinical services are provided by a registered intern in a private practice setting;
- Prohibits a registered intern from engaging in his or her own independent private practice.
- Limits intern registration to 5 years; and,
- Prohibits an individual who has held a provisional license from applying for an intern registration in the same profession.

II. Present Situation:

Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling

The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling (the board) is located within the Department of Health (DOH) and is responsible for licensing and regulating the practice of clinical social work, marriage and family therapy, and mental health counseling pursuant to ch. 491, F.S.

The practice of clinical social work uses scientific and applied knowledge, theories, and methods for the purpose of describing, preventing, evaluating, and treating individual, couple, marital, family, or group behavior. The purpose of such services is the prevention and treatment of undesired behavior and enhancement of mental health. The practice of clinical social work includes methods of a psychological nature used to evaluate, assess, diagnose, treat, and prevent

emotional and mental disorders and dysfunctions (whether cognitive, affective, or behavioral), sexual dysfunction, behavioral disorders, alcoholism, and substance abuse. Such practice also includes, but is not limited to, psychotherapy, hypnotherapy, and sex therapy, counseling, behavior modification, consultation, client-centered advocacy, crisis intervention, and the provision of needed information and education to clients.¹

The practice of marriage and family therapy is the use of scientific and applied marriage and family theories, methods, and procedures for the purpose of describing, evaluating, and modifying marital, family, and individual behavior, within the context of marital and family systems, including the context of marital formation and dissolution. The practice is based on marriage and family systems theory, marriage and family development, human development, normal and abnormal behavior, psychopathology, human sexuality, psychotherapeutic and marriage and family therapy theories and techniques. The practice of marriage and family therapy includes methods of a psychological nature used to evaluate, assess, diagnose, treat, and prevent emotional and mental disorders or dysfunctions (whether cognitive, affective, or behavioral), sexual dysfunction, behavioral disorders, alcoholism, and substance abuse. Such practice includes, but is not limited to, marriage and family therapy, psychotherapy, including behavioral family therapy, hypnotherapy, and sex therapy, counseling, behavior modification, consultation, client-centered advocacy, crisis intervention, and the provision of needed information and education to clients.²

The practice of mental health counseling is the use of scientific and applied behavioral science theories, methods, and techniques for the purpose of describing, preventing, and treating undesired behavior and enhancing mental health and human development and is based on the person-in-situation perspectives derived from research and theory in personality, family, group, and organizational dynamics and development, career planning, cultural diversity, human growth and development, human sexuality, normal and abnormal behavior, psychopathology, psychotherapy, and rehabilitation. Such practice includes methods of a psychological nature used to evaluate, assess, diagnose, and treat emotional and mental dysfunctions or disorders (whether cognitive, affective, or behavioral), behavioral disorders, interpersonal relationships, sexual dysfunction, alcoholism, and substance abuse. It also includes, but is not limited to, psychotherapy, hypnotherapy, sex therapy, counseling, behavior modification, consultation, client-centered advocacy, crisis intervention, and the provision of needed information and education to clients.³

Board Rule 64B4-2.006, F.A.C, defines a “mental health professional,” as used in s. 491.005(1)(c), (3)(c), and (4)(c), F.S., to mean a psychotherapist licensed under ch. 491, F.S., a psychologist licensed under ch. 490, F.S., a psychiatrist licensed under ch. 458 or 459, F.S., who is certified by the American Board of Psychiatry and Neurology; or an advanced registered nurse practitioner certified under s. 464.012, F.S., and who is certified by a board approved national certification organization pursuant to Rule 64B9-4.002, F.A.C.

¹ Section 491.003(7), F.S.

² Section 491.003(8), F.S.

³ Section 491.003(9), F.S.

In order to practice any of these professions, an individual must be licensed by the board after having met a series of requirements. The two major requirements, other than payment of a fee, and completion of educational requirements, for licensure in any of the fields is completion of a supervised internship and the successful completion of a theory and practice examination.⁴

Internships

In order to be licensed as a clinical social worker, a marriage and family counselor, or a mental health counselor, an individual must have completed designated educational requirements and at least 2 years of practice supervised by a licensed practitioner.⁵ During the time that the person is completing the experience requirement, he or she must register as an intern.⁶

To become an intern the applicant must complete the application form and submit a nonrefundable application fee not exceeding \$200 as set by the board. The applicant must also have completed the necessary education requirements, submitted an acceptable supervision plan, and identified a qualified supervisor.⁷

An intern may renew his or her registration every 2 years, indefinitely, by payment of a renewal fee of \$80 for each 2-year period. No continuing education is required for interns. Currently, there are 3,239 clinical social work interns, 859 marriage and family therapy interns, and 4,237 mental health counseling interns. Of this total, more than 700 interns have been renewing their registered intern license for over 10 years, and 150 of them have been renewing since the inception of this law in 1998.⁸

Disciplinary cases have shown that those who have held intern registration for many years are no longer remaining under supervision as is required by law, and many are in private practice without meeting minimum competency standards. The DOH has received increasing numbers of complaints against registered interns for various infractions including filing false reports, failing to meet minimum standards, boundary violations, sexual misconduct, Medicaid fraud, and false advertising. To date, the DOH has received 134 formal complaints against clinical social work interns, 51 complaints against marriage and family interns, and 238 complaints against mental health counselor interns. 67 complaints have resulted in disciplinary actions, including two recent emergency restriction orders signed by the State Surgeon General.⁹

Provisional License

A provisional license permits an individual who is applying by endorsement or examination and who has satisfied the clinical experience requirements to practice under supervision while completing licensure requirements. Provisional licenses expire 24 months after the date issued

⁴ Section 491.005(1)(d), (3)(d), and (4)(d), F.S.

⁵ Section 491.005, F.S.

⁶ Section 491.0045, F.S.

⁷ *Id.*

⁸ Department of Health, *Senate Bill 1388 Fiscal Analysis* (Mar. 4, 2014) (on file with the Senate Committee on Children, Families, and Elder Affairs).

⁹ *Id.*

and may not be renewed or reissued.¹⁰ Currently there are 66 provisionally licensed clinical social workers, 11 provisionally licensed marriage and family therapists, and 107 provisionally licensed mental health counselors. In the past, the board has accepted applications for registered internships from practitioners whose provisional licenses have expired without their having met the requirements for licensure, as there is no prohibition against a provisional licensee applying for an intern registration.¹¹

III. Effect of Proposed Changes:

Section 1 amends s. 491.0045, F.S., to provide that registration as a social worker, marriage and family counselor, or mental health counselor intern is, in general, valid for 5 years from the date of issue. Registrations issued on or before March 31, 2015, expire March 31, 2020, and may not re-renewed or reissued. Registrations issued after March 31, 2015, expire 60 months after the date of issue and may be renewed only if the candidate has passed the theory and practice examination required for full licensure.

The bill requires that persons registered as interns must remain under the supervision of a licensed practitioner while practicing under registered intern status. Individuals who fail to comply with statutory internship requirements may not be granted a license, and the experience accrued by such individuals while not in compliance may not count toward satisfying the experience requirements for licensure. This section also prohibits persons who have held a provisional license from applying for an intern license in the same profession.

Section 2 amends s. 491.005, F.S., to require that a “licensed mental health professional” be on the premises when clinical services are provided by a registered intern in any of the three disciplines, in a private practice setting. The bill prohibits registered interns from engaging in their own independent private practice.

Section 3 provides for an effective date of July 1, 2014.

In addition to substantive changes, revisions are made throughout the bill to remove obsolete language and to make grammatical and conforming changes.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

¹⁰ Section 491.0046, F.S.

¹¹ Department of Health, *ibid.*

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Interns will no longer be required to pay a biennial renewal fee but will be required to pay initial fees and renewal for full licensure after 5 years in order to continue to practice in these professions. Some interns may not be able to meet the requirements for full licensure and may not be able to continue to practice in these fields.

C. Government Sector Impact:

The DOH expects to experience an insignificant fiscal impact related to updating its Customer Oriented Medical Practitioner Administration System (COMPAS) licensure system to accommodate the changes in SB 1388.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 491.0045 and 491.005.

IX. Additional Information:

A. Committee Substitute – Statement of Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.