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STATE OF MAINE DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION 35 STATE HOUSE STATION AUGUSTA, MAINE 04333-0035

Anne L. Head Commissioner

MEMORANDUM

To: Members of the Health Coverage, Insurance and Financial Services Committee

From: Anne L. Head

Subject: Licensing Process of the Maine Board of Counseling Professionals Licensure

Date: March 9, 2021

Questions have been raised about the timeline for processing a professional counseling license. In response to these questions, my staff has undertaken a review of data and processes.

When a complete license application is submitted, the application can be processed in an average of 20 days.

In 2020, the board received 233 applications. Of those, 114 (approximately half) were submitted incomplete. An incomplete application is processed in an average of 2-3 months. However, many of those incomplete applications take even longer. When an incomplete application is submitted online, the applicant receives an immediate confirmation of receipt of application and list of items needed to complete the application. When a paper application is submitted, and the application is incomplete, staff calls or emails the applicant to outline the missing information. Staff endeavors to assist these applicants by email and phone.

One confusing and complicating step in the process is that the applicant needs to both 1) apply to take the National Board of Certified Counselors (NBCC) exam; and 2) complete and submit a license application, part of which includes a passing score on the NBCC exam. The NBCC exam is administered by a national entity. The applicant must submit a complete exam application in order to qualify to take the exam. It then takes some time to schedule and sit for the exam. The applicant must then pass the exam and the NBCC must notify the Board of the applicant's score. Much of the exam process is out of OPOR's control.

The next three pages describe three examples of timelines for professional counseling license applicants who submitted incomplete applications. These examples are taken from the list of individuals who signed the letter to the Attorney General dated February 25, 2021. Each applicant and their application had unique circumstances. The timelines below reveal how staff assists applicants to work through the exam and licensure application processes. It also reveals challenges experienced by applicants due to the complexity of the licensing process.

Example 1 Conditional Clinical Counselor (paper application)

4/18, 26/18 Individual emails staff with questions about application process.

4/26/18 Staff calls individual to answer questions about qualifications/process.

5/14/18 Staff receives paper application by mail from applicant for approval to take the conditional clinical counselor exam given by NBCC. The application is incomplete.

Applicant qualified for exam and was approved to take it even though required supervision affidavit had not been submitted. Staff sent letter with instructions to register for the exam and also a second letter with the following instructions:

"Please be advised that prior to issuing your license you will be required to submit a completed supervisor's affidavit. Please sign and date the form in the "applicant's signature" section and then have your supervisor sign and date as well as include the supervision start date and then return the form to this office."

11/7/18 The applicant passed the exam.

12/7/18 Staff receives exam score report from the NBCC. NBCC only reports scores once each month. Scores are not official until staff receives score report from NBCC. Staff notifies applicant of passing score and also reminds applicant to submit the required supervision information requested on 7/3/18.

12/19/18 Staff sends another letter to the applicant asking for the supervision plan signed by supervisor so the license could be issued.

4/8/19 The supervision plan is received, and staff issues the license the same day.

NOTE: This license application took 11 months to complete the process from the time the applicant applied to be qualified for the exam until the application for licensure was completed. This was a unique situation in that the applicant had taken time off after graduating with her Master's degree in counseling on March 31, 2015 and was having difficulty finding a potential supervisor four years after graduation.

Example 2 Clinical Counselor (on-line application)

Applicant, a Maine licensed conditional clinical counselor, applied for the NBCC exam to move up to a full clinical counselor license. Applicant submits an incomplete online application for exam qualification. Application is incomplete because of missing supervision information. An automatic notification was immediately sent to the applicant notifying applicant of the incomplete application and identifying the missing documentation. (See Attachment A).

- 9/11/20 Letter from one of the supervisors with the supervisor's affidavit received. Application still incomplete because applicant needed to list all supervisors. Applicant had been notified of this requirement in the 8/13/20 email.
- 10/9/20 Staff sent email request for additional information about all supervisors.
- Applicant was approved to take the exam after one of the supervisors affirmed that applicant had received the required hours of supervision necessary to qualify for the exam. Applicant also informed that they must submit affidavits from every supervisor or for licensure.
- 11/2/20 Applicant passes exam.
- Staff receives the exam score from NBCC and sends email to applicant about passing score and includes a reminder that before a license can be issued the correct supervision affidavits must be submitted.
- 12/3/20 Staff received email from applicant wondering why license has not been issued.
- 12/14 /20 Staff emailed applicant asking whether she submitted an application for license. Applicant responded that she did not realize she had to apply for license. Applicant then applies for license but encounters difficulty due to a staff error. Staff works with applicant and identifies and fixes the issue.
- 12/16/20 Staff emailed applicant with a reminder that the supervision affidavits had not been submitted.
- 1/8/2021 Affidavit from one supervisor received. Applicant notifies staff that the other supervisor's affidavit is being sent by regular mail.
- 1/15/21 Staff receives the final supervision affidavit by email. Application complete.
- 2/9/21 License issued.

This applicant was licensed as a conditional clinical counselor through the described application process and, thus, was able to continue working. The applicant had more than one supervisor during conditional licensure. When there are multiple supervisors for a conditional license, each supervisor must submit a separate affidavit.

NOTE: This license application took 11 months to complete the process from the time the applicant applied to be qualified for the exam until the applicant submitted the required supervision plan and the application for licensure was completed.

Example 3 Clinical Counselor (paper application)

5/16/19 This applicant was licensed as a conditional creative arts therapist in New York State and was also licensed as a conditional clinical counselor in Maine.

Applicant applied to take the NBCC exam to move up to a full clinical counselor

license. Staff receives by mail applicant's incomplete paper application for exam qualification. On the application, dates of licensure in New York State did not match the dates of supervision in New York on the supervision affidavit.

6/24/19 Staff sent applicant a request for additional information 1) regarding supervision in New York and 2) dates of licensure in New York. Those supervision hours needed to be included in the application to take the NBCC exam. Staff assists applicant by going to New York's website for licensure verification but the dates of supervision in New York don't match the dates in the Maine application.

Phone call and multiple emails between staff and applicant

2/21/20

License issued

8/17/19	Email between staff and applicant, assistance with additional information needed
8/21/19	Email between staff and applicant
8/22/19	Email between staff and applicant
9/10/19	Emails between staff and applicant
9/12/19	Email between staff and applicant
9/13/19	Email between staff and applicant
9/16/19	Email between staff and applicant
9/19/19	Applicant submits documentation of supervision hours and the correct dates of New York licensure. NBCC exam application completed and applicant is approved to take the exam
1/11/20	Applicant passes exam
2/12/20	Score received from NBCC
2/15/20	Online license application received

This applicant was licensed as a conditional clinical counselor through the described application process and able to continue working.

NOTE: This application process took 9 months to complete from the time the application was received until the time the full license was issued. It took four months for the applicant to complete the exam application, four months for applicant to pass exam and one more month for staff to receive exam scores. Once the completed application for licensure was received, the license was issued six days later.

Assessment and Planning

During the past week, I have met frequently with licensing staff to hear about their challenges with this profession's licensing process. We have analyzed data from reports generated by the licensing database (ALMS) and reviewed that data with the technical staff assigned to ALMS. I have consulted with members of the Governor's Office staff about budget issues. I have also reached out to the leaders of Concerned Therapists of Maine to thank them for sharing their concerns and to arrange a meeting to get their thoughts on needed improvements. Based on our review and the discussions to date, I will take the following actions to improve the counselors licensing process:

- Create one limited term position funded with permanent salary savings to support the behavioral health licensing group. A limited term position could be carried into the next biennial budget and made permanent.
- Contract for temporary staff to handle administrative functions (e.g. answer phones and take messages) to support the licensing staff.
- Update ALMS, by working with the ALMs technical staff to upgrade the existing on-line
 licensing platform and to create clearer application instructions and clearer automatic
 email messaging. In addition, work to incorporate an automatic messaging system for
 applicants who submit paper applications by mail. Our goal is also to identify
 opportunities to encourage most applicants to use the online application.
- Review existing board rules to clarify confusing provisions and eliminate unnecessary or redundant requirements. I will share with the board the challenges identified through this review process, especially those created by the current supervision requirements. The Board, its staff, and legal counsel will undertake this review consistent with APA rulemaking requirements.
- Engage the leaders of Concerned Therapists of Maine as a focus group to better understand how the licensing process can be improved from the licensee's perspective.

ATTACHMENT - A

From: info@informe.org

To:

Subject: Confirmation of Online Transaction: Clinical Professional Counselor exam

Date: Thursday, August 13, 2020 3:00:17 PM
Attachments: confirmation 2404195-2458947.pdf

EXTERNAL: This email originated from outside of the State of Maine Mail System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Thank you for completing your online transaction (Clinical Professional Counselor examfor

transaction number is 2404195-2458947.

Please submit the additional documentation as described on your application. Your application fee has been fully paid and you do not need to remit any payment with the additional documents.

If you have difficulty opening the attachment, please

There was a link here that the applicant can click and be brought to their application. It was removed for redaction purposes.



BOARD OF COUNSELING PROFESSIONALS LICENSURE 35 STATE HOUSE STATION, AUGUSTA, ME 04333-0035

Transact on Type: Clinical Professional Counselor exam | Lcense: CLINICAL PROFESSIONAL COUNSELOR

Transaction Receipt

-Attachments/Documentation Needed

Attachments/Documentat on Needed: Your app cat on cannot be processed unt the BOARD O COUNSELNG PRO ESS ONALS LCENSURE has received a required documentation described in the Supporting information section(s) for the tems is sted below. You must include your name and app cation type on a communications to the board. Submit the information to BOARD O COUNSELNG PRO ESS ONALS LCENSURE, 35 STATE HOUSE STATION, AUGUSTA, ME 04333 0035. If the additional information is not received within 30 business days, your application may be denied.

· Superv sors Aff day t

Transaction Details

Date of Transact on: 08/13/2020 02:58 PM
 Transact on Number: 2404195-2458947

· App cant:

Transact on Type: Clinical Professional Counselor exam
 Lcense Type: CLINICAL PROFESSIONAL COUNSELOR

Lcense: CCRegulator:

BOARD OF COUNSELING PROFESSIONALS LICENSURE 35 STATE HOUSE STATION, AUGUSTA, ME 04333-0035

• ee Pad:

ees are nonrefundabe.

EXAMINATION FEE: \$25.00

Total: \$25.00

Fees are nonrefundable.

Application Instructions

Pease compete this appication and submit on ne with your credit card payment. If you do not wish to pay by credit card, you may still use this on ne appication, then print and male the appication with your check.

Supplemental Information Instructions-

You may be asked for the fo owing documentation in addition to the basic application information. The online application alows for uploading these documents in a variety of formats. Please have documents ready if you wish to upload them with your online application; otherwise you will be required to provide them to the office via emailiary uploaded documents will NOT be automatically provided to the board unless you complete the transaction on neighbor and the credit card payment.

Superv sors Aff dav t

Applicant Information

P ease review the information below. If this information is incorrect, you may contact BOARD O COUNSELNG PRO ESSIONALS LCENSURE for correction.

Frst Name:
Mdd e Name:
Last Name:
Suff x:
B th Date:

Licensee Contact Information

The State admnsters an Address Confident a ty Program (ACP) through the Secretary of States office for victims of domestic violence, sexua assault and staking. Detais are avaiable at http://www.maine.gov/sos/acp.

Address

This address will be displayed on the State's Web Stell Note that only the city, state and zip of an address will be displayed

Address Type: Mailing

Phone

f any Prma y phone exsts or s added, t w bedsp ayed on the States Web Ste

Number: +1 (Type: Primary

Email

An ema address s required for transact on confirmation purposes

Ema Address

Ema Type: Primary

Supervisor's Affidavit

You must provide a signed Supervisor's Affidavit form.

You have agreed to provide this information to the board later via email, mail, or by logging back into this website and uploading the documentation.

Examination Request

Do you require special accommodations to take the exam?: No

LAWS and RULES-

Pease read these carefu y and revew perod cay for changes. You are respons be for knowing and compying with Maine Laws, Program Rues, and Office of Professional and Occupational Regulation Rues throughout your censure:

Laws and Rules for the Board of Counseling Professionals Licensure:

https://www.ma ne.gov/pfr/profess ona cens ng/profess ons/counse ors/ aws.htm

Licensing Rules for the Department of Professional and Financial Regulation, Chapters 10, 11, and 13:

http://www.ma ne.gov/sos/cec/ru es/02/chaps02.htm#041

Statutory Authority, Titles 5 & 10:

http://www.ma ne eg s ature.org/ eg s/statutes/5/t t e5ch341sec0.htm http://www.ma ne eg s ature.org/ eg s/statutes/10/t t e10ch901sec0.htm

Attest & Agree

You cannot submt this request unless you attest to the accuracy of the information provided within this application.

I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief.

Ques ons abou h s serv ce? Con ac BOARD OF COUNSEL NG PROFESS ONALS L CENSURE a (207) 624-8603 or ema counse board@mane.gov

Credits Information Transaction Security

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Maine.gov

Regulatory Licensing & Permitting



BOARD OF COUNSELING PROFESSIONALS LICENSURE 35 STATE HOUSE STATION, AUGUSTA, ME 04333-0035

Transact on Type: Clinical Professional Counselor license based on pathway 2 | Lcense: CLINICAL PROFESSIONAL COUNSELOR

Transaction Receipt

-Attachments/Documentation Needed

Attachments/Documentat on Needed: Your app cat on cannot be processed unt the BOARD O COUNSELNG PRO ESS ONALS LCENSURE has received a required documentation described in the Supporting information section(s) for the items is sted below. You must include your name and app cat on type on a communications to the board. Submit the information to BOARD O COUNSELNG PRO ESS ONALS LCENSURE, 35 STATE HOUSE STATION, AUGUSTA, ME 04333 0035. If the additional information is not received within 30 business days, your application may be denied.

- Exam Resuts
- · Copy of cense aw and Board rules
- D sc osure

Transaction Details

Date of Transact on: 03/02/2021 02:50 PM
 Transact on Number: 2546902-2571761

App cant:

Transact on Type: Clinical Professional Counselor license based on pathway 2

• Lcense Type: CLINICAL PROFESSIONAL COUNSELOR

Lcense: CCRegulator:

BOARD OF COUNSELING PROFESSIONALS LICENSURE 35 STATE HOUSE STATION, AUGUSTA, ME 04333-0035

ee Pa d:

ees are nonrefundabe.

ORIGINAL LICENSE: \$200.00 APPLICATION FEE: \$25.00 SBI REPORT FEE: \$21.00

Total: \$246.00

Fees are nonrefundable.

Application Instructions

Pease compete this appication and submit on ne with your credit card payment. If you do not wish to pay by credit card, you may still use this on ne appication, then print and mail the appication with your check.

Supplemental Information Instructions

You may be asked for the fo owing documentation in addition to the basic application information. The online application alows for uploading these documents in a variety of formats. Please have documents ready if you wish to upload them with your online application; otherwise you will be required to provide them to the office via emailiar provide to the complete processing of your application. Also note that any uploaded documents will NOT be automatically provided to the board unless you complete the transaction on neighbor acredit card payment.

- Transcrpt(s)
- D sc osure
- · Copy of cense aw and Board rules
- Lcense Verf cat on
- Menta Heath Lcenses
- Dsc p nary Act on f app cabe

Applicant Information

P ease review the information below. If this information is incorrect, you may contact BOARD O COUNSELNG PRO ESSIONALS LCENSURE for correction.



Have you ever gone by a name other than that sted above?: Yes

Previous Name(s)

You have nd cated that you once had a different name. Pease provide your previous name information here.



Licensee Contact Information

The State admnsters an Address Confident a ty Program (ACP) through the Secretary of States office for victims of domestic violence, sexua assault and staking. Detais are avaiable at http://www.maine.gov/sos/acp.

Address

This address will be displayed on the State's Web Site. Note that only the city, state and zip of an address will be displayed

Address: (New)
Address Type: Mailing

Phone

f any Prma y phone exsts or s added, t w be d sp ayed on the States Web Ste

Number: +1 (New) Type: Primary

Email

An ema address s required for transact on confirmation purposes

Ema Address: (New)
Ema Type: Primary

Background Question(s)

Has any ursd ct on taken d sc p na y act on against any professional cense you hold or have held or denied your application for censure?: No

Undergraduate and Graduate Education

Pease st each academic institution you have attended.

Academic Institution

Name of Academic institution: Salem State University
Maing Address:

352 Lafayette St, Salem, MA 01970

Degree Granted: Master of Science, Counseling Psychology

Date Conferred: 05/19/2001

You must provide a transcript.

transcripts.docx

Credentialing History

Status: New

Type: CLINICAL PROFESSIONAL COUNSELOR

Lcense Number: 5406 ursd ct on: Massachusetts ssue Date: 09/24/2003 Exprat on Date: 12/31/2021

Status: New

Type: CLINICAL PROFESSIONAL COUNSELOR

Lcense Number: 2300 ursd ct on: New Hampshire ssue Date: 12/02/2020 Exp rat on Date: 12/02/2022

For each license in another jurisdiction listed, you must provide a Verification of Licensure to complete your application. You can either upload the information now or if you are not providing the information as a part of this online transaction, submit the information either by email to counsel.board@maine.gov or mail to BOARD OF COUNSELING PROFESSIONALS LICENSURE, 35 STATE HOUSE STATION, AUGUSTA, ME 04333-0035.

nhverify.pdf MAverify.pdf

Examination Details

Status: New
Type: NCMHCE
Date: 09/01/2002
Score: 0
Percentage: 0

Please provide the exam results.

You have agreed to provide this information to the board later via email, mail, or by logging back into this website and uploading the documentation.

Licensing Law and Board Rules

You must provide a copy of the relevant licensing law and Board rules of the licensing or certifying state or jurisdiction from which you are applying. Note: must include scope of practice.

You have agreed to provide this information to the board later via email, mail, or by logging back into this website and uploading the documentation.

Mental Health Licenses

You must provide a copy of all mental health licenses under which you have practiced during the five (5) consecutive years immediately preceding this application.

nhlmhc.jpg MAlic.pdf

Disclosure

You must provide a copy of your disclosure statement. Please see the <u>sample disclosure statement</u> on our website. Note: must include prospective Maine licensure dates (two-year licensure period).

You have agreed to provide this information to the board later via email, mail, or by logging back into this website and uploading the documentation.

LAWS and RULES

P ease read these carefu y and rev ew per od ca y for changes. You are respons be for knowng and compyng wth Mane Laws, Program Rues, and Office of Professiona and Occupationa Regulation Rues throughout your censure:

Laws and Rules for the Board of Counseling Professionals Licensure:

https://www.ma.ne.gov/pfr/profess.ona_cens.ng/profess.ons/board_of_counse_ng_profess.ona_cens.rues_

Licensing Rules for the Department of Professional and Financial Regulation, Chapters 10, 11, and 13:

http://www.ma.ne.gov/sos/cec/ru.es/02/chaps02.htm#041

Statutory Authority, Titles 5 & 10:

http://www.ma ne eg s ature.org/ eg s/statutes/5/t t e5ch341sec0.htm http://www.ma ne eg s ature.org/ eg s/statutes/10/t t e10ch901sec0.htm

Attest & Agree

You cannot submt this request unless you attest to the accuracy of the information provided within this application.

I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief.

Ques ons abou hs service? Con ac BOARD OF COUNSELING PROFESS ONALS LICENSURE a (207) 624-8603 or ema counse board@maine.gov

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	Con ac echn ca suppor	