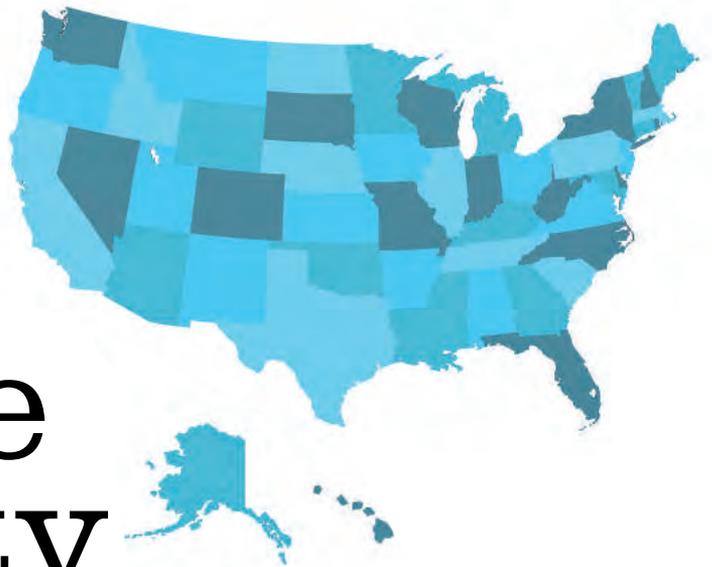


MFT Licensure Portability



MFTs frequently encounter barriers in obtaining licensure as marriage and family therapists in the United States. Many LMFTs who move to other states encounter unnecessary barriers to becoming licensed as MFTs in these states. These barriers impact MFTs of all backgrounds, even MFTs who have been practicing for many years.

License portability is the ability to take an individual's qualifications for a license in one state and apply them for licensure in another state. Under the current standard in a majority of states, an MFT state licensing agency or board will grant an MFT license to an applicant licensed in another state only if the applicant's qualifications are substantially equivalent to the qualifications for licensure that the agency or board enforces in that state. This "substantially equivalent" standard has led to major barriers in the mobility of the profession. These barriers are unnecessarily arduous for LMFTs, who then must track down previous supervisors, find old course syllabi and descriptions, and spend money and time on additional coursework simply because the original course was labeled differently. The more subjective nature of the substantially equivalent standard of portability has resulted in members encountering significant delays in obtaining a license, or denial of licensure completely. Some LMFTs who moved to

other states have even reported seeking licensure under another mental health license because of the difficulties with the portability process for obtaining an MFT license. These unnecessary barriers do nothing to protect the public, and lead to decreased access to mental health providers during a time of dire behavioral health workforce shortages.

In order to address concerns from members and improve the ability of qualified MFTs to move to other states and continue to practice, AAMFT has developed a new MFT model portability law. If implemented by state policymakers, this new model will eliminate unnecessary barriers to licensure and greatly ease the ability of MFTs to move to other states and practice.

Background

AAMFT is not the only organization examining license portability. Over the last few years, there has been a marked increase in interest among policymakers and other organizations to eliminate unnecessary barriers to

healthcare and other occupational licensing that hinders the ability of a qualified licensee to obtain an identical license in another state. At the federal level, the Federal Trade Commission (FTC) has been actively looking at barriers to occupational licensing that hinder competition. In September 2018, the FTC released a report on licensure portability entitled *Options to Enhance Occupational License Portability*. The report emphasized the need for improved portability processes, as they can impose significant barriers to licensure in our increasingly mobile society. In December 2018, the U.S. Department of Health and Human Services and two other federal departments released a report entitled *Reforming America's Healthcare System Through Choice and Competition*. Among other things, this report recommended that states should consider adopting model laws or other methods to improve licensure portability. Some state legislatures and/or regulatory agencies have also

started to review any potential barriers to occupational licensure, including portability. For example, in Indiana, a law went into effect in 2017 that requires the composite licensure board that regulates LMFTs and licensed professional counselors (LPCs) to grant a license to an applicant if the applicant has an MFT or counseling license in another state and has passed an exam.

Other professional organizations have also taken steps to standardize portability processes throughout the U.S. Within the MFT field, the Association of Marital and Family Therapy Regulatory Boards (AMFTRB) adopted a new model for license portability. Within the counseling field, the associations representing LPCs have developed two portability models. In the social work profession, the Association of Social Work Boards (ASWB) is making efforts to tackle problems with licensure portability impacting social workers, and has been heavily involved in this issue over the last few years. So far, all of the proposals put forward by these other organizations are aimed at removing unnecessary requirements to becoming licensed in other states, not adding additional requirements.

AAMFT Member Portability Survey

In crafting a portability model, AAMFT examined the evolving political and policy landscape as well as the opinions and experiences of our members. In order to obtain additional information from members concerning licensure portability challenges, AAMFT created a short survey that asks several questions concerning the portability of the MFT license among the states. This survey on license portability was distributed to five different membership categories. A total of 4,473 survey responses were collected. The surveys were sent out in the following order: Emerging Professionals, Approved Supervisors, Family TEAM members, Student

Members, and finally, all other AAMFT members in the United States. If a member was a participant of two or more groups, they would have received a survey with the first priority group listed. The last category, the general member category, includes U.S. members who are not members in one of the other four groups.

Participation levels for each group were calculated by dividing the number of survey responses by the number of members in that category invited to take the survey. Participation levels are listed below:

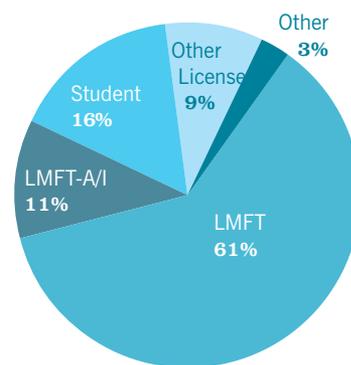
- Emerging professionals: 24%
- Approved Supervisors: 27.6%
- Family TEAM: 30.3%
- Student Member: 10.3%
- General Members: 19.2%

Of the survey participants, 61% reported they were a licensed marriage and family therapist. Figure 1 shows a full break down of license type for the survey respondents.

Establishing a Need

One of the main goals of the survey was to establish a need for a standard license portability model. We asked survey participants if they believe barriers hinder MFT license portability,

FIG. 1 LICENSE TYPE OF RESPONDENTS

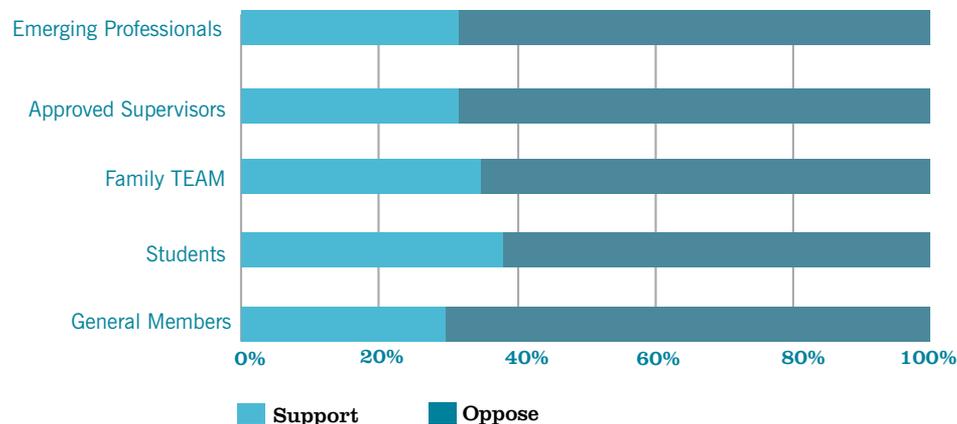


and an astounding 94% of all participants said yes.

When asked if they support or oppose the current substantially equivalent standard for portability (“Some state licensing boards utilize a more subjective process to determine if another state’s licensing requirements are substantially equivalent to their own standard. Do you support or oppose this process?”), 68% of members opposed. Figure 2 shows that each group significantly opposes this process.

The results from these two survey questions firmly present a need for a different portability standard.

FIG. 2 DO YOU SUPPORT OR OPPOSE THE CURRENT SUBJECTIVE PROCESS OF SUBSTANTIAL EQUIVALENCE?



Preferred Portability Models and Standards

Another question asked members which portability model they preferred. The answer choices represented several possible models, and survey participants could select more than one option. Overall, the most popular choice was that of no additional requirements for license portability, meaning that an applicant licensed as an MFT in one state should be able to receive an MFT license in another state without having to meet any additional requirements. The second most popular answer was the current standard of substantially equivalent. Despite many members selecting substantially equivalent as their preferred model, the rest of the survey results strongly support an easier model of portability than the current standard. Figure 3 shows levels of support by group for potential portability models. Since multiple answer selections were possible for this question, it's important to note that n= 4,123, meaning 4,123 members answered this question. Of those who answered the question, 8,548 answer options were chosen (given the ability to select more than one answer). The percentages reflected in Figure 3 were calculated by dividing the total number of selections for one option by the number of total member respondents in that group. For example, 307 approved supervisors selected "No additional requirements" as a preferred model out of 593 approved supervisors that answered the question, which means 51.8% of

respondents showed support for no additional requirements for portability. AAMFT also surveyed members on licensure exam exemption based on when an individual was licensed. In some cases, MFTs were licensed before the exam was created and have been practicing for years. This presents a problem when an MFT who has not taken the exam seeks licensure in another state where the exam is required for licensure. The most common response that respondents chose was to eliminate the exam requirement for those individuals (Figure 4).

Comments from Survey Participants

In addition to answering the questions, the survey included text boxes that allowed members to leave comments. A majority of comments supported change to the current portability standard. Many members included stories of their own challenges, including, but not limited to: taking additional academic courses, accumulating additional hours of supervision, and tracking down previous supervisors.

Summary of Survey Results

In summary, this survey has proved to be very useful in gathering the opinions of members on portability. The results reflect the following:

- Almost all participants believe that there are barriers for an LMFT to obtain an MFT license in another state.
- A majority oppose the current and more subjective substantially equivalent standard.

- When asked to select the preferred portability model, the most popular option was no additional requirements.
- For those favoring years licensed or years of active practice as a standard, three of the five groups favored five years of practice with the Students and Emerging Professionals favoring two or three years of practice.
- In two questions regarding hypothetical applicants who had been practicing for three years, a large majority favored allowing licensure by portability of an applicant has been practicing for three years, no matter whether the applicant was actively practicing or practicing just part-time.
- In a question regarding a hypothetical applicant who had been practicing for 19 years, a large majority were willing to allow licensure by portability without taking a clinical exam for this experienced LMFT who never took the clinical exam at any time.
- A majority of written comments favored improved portability.

AAMFT Model Portability Law

Based upon member feedback and broader healthcare and regulatory trends, AAMFT believes that the MFT profession should adopt a more uniform state MFT licensure portability standard. Absent a compelling reason, a state should generally license a provider as an MFT in that state if that provider already has a valid and unrestricted license as an MFT in another state.

FIG. 3 DO YOU SUPPORT ANY OF THE FOLLOWING MFT LICENSURE PORTABILITY MODELS? (SELECT ALL THAT APPLY.)



The AAMFT Board of Directors endorsed the following portability model at its November 2018 meeting.

The licensure board shall issue a full and unrestricted license to an applicant to practice as a marriage and family therapist if the applicant:

- (1) has a valid and unrestricted license to practice as a licensed marriage and family therapist in another state or territory; and
- (2) has completed an application for licensure and paid any required fees.

Explanation of the Model

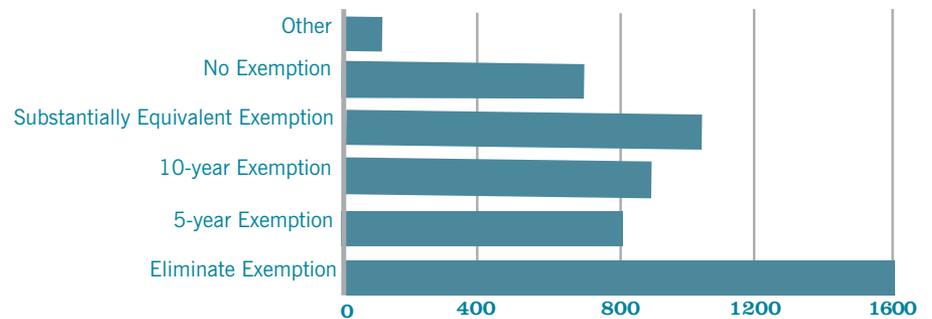
This portability model is a full endorsement model, meaning that a state will license an applicant as an LMFT if the applicant has a valid and unrestricted MFT license in another state. Below are some specific comments pertaining to this model:

- As used in this model, the term “state” means any state or territory in the United States, and the District of Columbia.
- This model applies only to full licensure as an LMFT, not associate licensure. Since associate licensure is not currently available in all states and some of the provisions for associate licensure can vary, such as when the MFT clinical exam must be taken, associate licensure was left out of this model.
- This model would not apply to those applicants with a restricted license due to an ethics violation or other reason, or those who had their MFT licenses terminated.
- The requirement of completing an application also includes complying with any related requirements that apply to all applicants for licensure in a state, such as passing a background check or passing an exam pertaining to state law or ethics. The model is not meant to supersede any of these general requirements that apply to all healthcare licensees in a state.

There are several compelling reasons for this proposal.

- **Mobility:** Many LMFTs face significant barriers to moving and practicing in another state. These barriers prevent

FIG. 4 PREFERENCE FOR THE TYPE OF PORABILITY EXEMPTION, IF ANY, FROM TAKING AN MFT CLINICAL EXAM FOR INDIVIDUALS SEEKING LICENSURE BY PORTABILITY WHO WERE LICENSED BEFORE THE EXAM WAS REQUIRED



qualified LMFTs from practicing in the locales where they want to live. More importantly for policymakers, these unnecessary barriers reduce the supply of MFTs in an area, which ultimately result in some potential clients either going without care or a delay in receiving care.

- **Protects the Public:** The model portability standard would protect the public with at least the same level of protection or better than the current portability standards. In some cases, AAMFT members denied licensure as an MFT due to unnecessary barriers have become licensed under another mental health license. The public is not adequately protected if applicants for MFT licensure are now regulated by a different professional board.
- **Pro-competitive:** As all other professions are modernizing their portability laws to keep abreast of current trends, the mobility of the workforce, and potential government scrutiny of portability laws, it is essential that the MFT portability laws protect the public while keeping up with current trends. Improved portability will improve job prospects for MFTs as employers will expect out-of-state applicants to be able to obtain license without encountering any unnecessary barriers.

Next Steps

With the adoption of a new portability model, the first step in achieving more standardized license portability processes is complete. Creating a model

is, unfortunately, the easiest part of pursuing uniform license portability. The next step will be presenting this model to policymakers in those states that are planning to address portability or in states where portability laws are most in need of reform and persuading them to adopt this new standard. It's important to note that this process will not be instant, and the entire model language might be amended before adopted in some states. AAMFT will need to advocate for these changes, with the help of our members.

What Can You Do?

1. Donate to the Practice Protection Fund. This voluntary, member-driven fund is used to pursue policy change in the states, and will be vital to pursuing standardized portability. Without contributions, AAMFT will be unable to hire lobbyists or fund advocacy initiatives to achieve standardized license portability. **Donate at www.aamft.org/PPF.**
2. Join the Family TEAM, AAMFT's grassroots advocacy network. License portability is a major priority for the Family TEAM's advocacy work. By joining the Family TEAM (and thus indicating an interest in advocacy), you will receive regular updates on issues like portability in our monthly e-newsletter.
3. Join us for a webinar on license portability, and a detailed discussion of the survey results. This webinar will be free to watch, and advertised in the AAMFT e-newsletter.