

OREGON BOARD OF LICENSED PROFESSIONAL COUNSELORS & THERAPISTS
Clinical Supervised Work Experience Rulemaking Q&A

1. **Q. Q. When does the Board’s rule change become effective?**
A. July 1, 2023.

2. **What does this amendment do?**
A. The rule changes, effective July 1, 2023, are summarized as follows:
 - The supervised clinical experience requirement for LPC and LMFT licensure is reduced by 500 hours, from a minimum of 2,400 hours to 1,900 hours supervised direct client contact hours. Since 400 of these hours may be completed pre-degree, this means that a minimum 1,500 direct client contact hours must be post-degree.
 - The minimum requirement of supervised direct client contact hours working with couples and families for LMFT licensure is reduced by 250 hours, from 1,000 to 750 hours.
 - The requirement that registered associates must complete at least 1,000 of the required hours of direct client contact while in a Board-approved associate registration plan is removed.
 - The post-licensure clinical experience that reciprocity applicants (both LPC and LMFT) may substitute for the required hours of supervised direct client contact is reduced from 1,000 to 500 hours.
 - Reciprocity applicants who have less than five years of post-licensure experience can now substitute that experience for the required hours of supervised direct client contact at a rate of 100 hours per year, up to five years/500 hours max.

3. **Q. Will the changes apply to currently registered associates and other current applicants?**
A. Yes.

4. **Q. What are the next steps a registered associate should take if they qualify for licensure on the effective date of the rule change?**
A. A registered associate who has completed the examination requirements (passed both the national and Oregon Law and Rules) and has met the clinical supervised work experience requirements should submit a completed six-month report on or after July 1, 2023. This will trigger Board staff to review the applicant’s file and determine if licensure requirements are met. As a reminder, registrants must submit their reports via the [Licensee Portal](#). Staff will review submissions and respond if further information is needed or if there is a problem with a report. We appreciate your patience, as this rule change is expected to result in a significantly heavier workload for our staff members during this time.

5. Q. Is the Board also changing the three-year (36 month) duration requirement?

A. No. As a reminder, one year and 400 of the required direct client contact hours may be completed as part of the degree program. Nearly all counseling and therapy programs have practicum/internship components that meet or exceed these standards. Therefore, the post-degree clinical experience requirement for registered associates typically amounts to two years and 1,900 hours (1,500 hours starting July 1, 2023). While the [Diversity Study](#) conducted by Keen Independent Research, LLC found that Oregon's 1,900 post-degree hours requirement was higher than most states, it found that a minimum requirement of two years was typical. Of the states that have a minimum duration requirement, 71% require at least two years. The Diversity Study cautioned that establishing requirements that are lower than typically found in other states introduces risks to practitioners, consumers, and educational programs. It found that "supervised clinical experience is helpful to clinicians who need support for the challenging and stressful work they do, particularly early in their careers, and this support may be especially useful for clinicians from marginalized groups." The Board agrees with these findings and accordingly did not propose any reduction to the minimum 2 years of post-degree supervised clinical experience required for licensure.

6. Q. Why isn't the Board working to advocate for registered associates, including changing insurance reimbursement and improving wages?

A. Some comments received from licensees and registered associates reflect misunderstandings about the Board's role, responsibility, purpose, and scope of authority. The [Diversity Study](#) found that some stakeholders believe the Board has a more wide-ranging jurisdiction than reality dictates (educational pipeline, insurance regulation, and legislative advocacy), which contributes to a lack of trust and can have an adverse impact on diversity in the profession. For example, some stakeholders believe that the Boards should initiate legislation to promote the profession (e.g., legislation related to provider insurance coverage requirements) or take a position on legislation other than concepts which are introduced by the Boards themselves (which is not permitted by the Governor's Office). The Diversity Study found that "structural changes such as education funding and Medicare/private insurance reform could improve the financial outlook for registered associates but are outside the authority and resources of the boards."

The Board was created for the purpose of determining qualifications for licensure for LPCs and LMFTs (academic and training standards), ensuring that candidates meet the licensure qualifications (education, exam, experience, character, and fitness, etc.), ensuring ongoing compliance with licensure requirements (renewal, continuing education, professional disclosure statement, etc.), and establishing and enforcing a code of professional ethics. Board staff receive complaints and investigate alleged violations of Board law, rule, and the ACA Code of Ethics. The regulatory functions of the Board are set to create high standards for professional practice in Oregon and to ensure the ongoing competence of the professionals licensed. In summary, the Board's purpose is to protect the public.

The Board may act only within its statutory authority as determined by the Oregon State Legislature.

In contrast, the role of professional associations (e.g., the Oregon Counseling Association, the Oregon Association of Marriage and Family Therapists, and the Coalition of Oregon Professional Associations for Counseling and Therapy) are rooted in promotion of the profession. Associations typically offer continuing education trainings and networking opportunities, provide informational resources, keep members apprised of current issues, and engage in advocacy for—or in opposition to—legislation that affects the profession. Many professional associations offer peer consultations and provide advice on ethical or legal issues.

There are certainly areas where the interests of a regulatory board and a professional association will overlap. For example, proposed legislation that changes the continuing education requirements or modifies the scope of practice for an LPC or LMFT will have both regulatory and professional practice implications. However, there is an important distinction between a governmental regulatory board’s public protection mandate and a professional association’s professional advocacy role. The two will not always align when it comes to certain policy considerations.

7. Q. Why isn’t the Board awarding scholarships, grants, student loan forgiveness, supervisor stipends, and other programs/incentives to promote the workforce?

A. Much of this goes back to the response in #5, above, in the Board’s role and purpose as set forth in Oregon State Statute. Also, creating new programs requires a funding source. The Board’s operations are 100% funded by “Other Funds”- meaning licensing fees- not “General Fund” taxpayer dollars. The Board does not wish to raise fees paid by LPCs and LMFTs and applicants; we would prefer to *reduce* these fees as we are proposing to do for the 2023-25 biennium.

There are current opportunities within an Oregon Health Authority program called the [Behavioral Health Workforce Initiative](#), which was created to develop a diverse behavioral health workforce through scholarships, loan repayment, retention and peer workforce development, and awarding grants to licensed behavioral health providers to provide clinical supervision to registered associates.

8. Q. I heard that the Board requires licensees to retake the national exam every 10 years- is this true?

A. No, this is not true for current licensees. To qualify for *initial* licensure, reciprocity applicants (coming from another state) whose exams were passed more than 10 years ago may choose to either 1) retake an exam or 2) within the past 24 months complete the same continuing education (CE) required for license renewal (40 total clock hours). Most applicants already meet the CE requirement as they have completed CE to maintain their other state license.

9. Q. Will Registered Associates still be required to submit associate registration plans and six-month reports to the Board?
- A. Yes.