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Common Question & Best Practices: What the MN Board of MFT Thinks You Should Know

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What should we talk about?

1. Application & Licensure Process (Current / Proposed Changes)
2. Alternative Pathways to Licensure / Barriers to Licensure
3. License Portability
4. Telehealth & Your LMFT License
5. COMPLAINTS!
6. Supervision – Supervisor Requirements/Secondary Supervisor – Supervisor Responsibilities (Proposed Changes)
7. Continuing Education (Yes! It is a CE Reporting Year!)
8. Administrative Variances
9. Fee Changes

APPLICATION & LICENSURE PROCESS

Current LA/LM Licensure Process:

1. Applicant files initial application for LMFT licensure (Application for National Examination in MFT)
2. Applicant passes MFT National Exam - now eligible for LAMFT licensure
3. Applicant files Application for LAMFT Licensure – LA license issued; LA license maintained for remainder of supervised practice period
4. LA completes required supervised practice
5. LA files Application for LMFT Licensure
6. Application for LMFT Licensure approved; LA takes in-person, written MN State Exam
7. LA passes MN State Exam – LMFT license issued

APPLICATION & LICENSURE PROCESS

Proposed LA/LM Licensure Process:

1. Applicant files initial Application for MN LMFT Licensure (Part I)- Incorporates information currently collected on Application for National Examination in MFT & Application for LAMFT Licensure; application fees combined.
2. Applicant required to pass online MN LMFT State Exam *prior* to approval of initial application.
3. Upon approval of initial application, LAMFT license issued; applicant will maintain LAMFT licensure until issuance of LMFT license.
4. LA must pass MFT National Exam during supervised practice period.
5. LA completes required supervised practice requirements.
6. LA files Application for MN LMFT Licensure (Part II) documenting completion of supervised practice. Upon approval of application, LMFT license issued.

ALTERNATIVE PATHWAYS TO LICENSURE / BARRIERS TO LICENSURE

- English Language Learner – May request additional testing time at no additional fee (MN only state that pays additional testing fee for ELL-approved candidates)
- BMFT represented on Culturally Informed & Culturally Responsive Mental Health Task Force – one statutory charge is to make recommendations on recruiting mental health providers from diverse racial and ethnic communities
- BMFT has requested AMFTRB (national regulatory board association that promulgates MFT national exam) provide exam data by racial and ethnic demographics
- BMFT considering participation in pilot project to provide exam preparation tools at low/no cost to applicants. (MN Board of Psychology launching similar program now)
- BMFT will be transitioning MN LMFT State Exam to on-demand format (with answers provided to promote continuous learning)
- BMFT is aware of efforts in social work profession to reduce reliance on national, standardized testing (may not include LICSW) and creation of alternate, provisional licensure tracks
- Consequences of issuance of alternate pathway license – unknown at this time (ability to be credentialed; ability to seek licensure in another state; impact on hiring)
- Significant grant and loan funding available for variety of behavioral health-related providers / costs – See MN Dept. of Health Office of Rural Health & Primary Care

LICENSE PORTABILITY

- BMFT's jurisdiction governs practice of MFT in Minnesota. BMFT cannot grant a MN LMFT the right to practice in another state. Other states cannot authorize an LMFT to practice in MN.
- Small numbers of LMFTs nationally make a licensure compact unlikely. Cost too high to be supported by LMFTs that would participate in compact.
- AAMFT – Recently launched [AccessMFTs.org](https://www.accessmfts.org) focused on license portability. Standardizing requirements across states.
- LMFT licensure by reciprocity/endorsement – Trend is to decrease number of years of LMFT licensure required before eligible for LMFT licensure in another jurisdiction. BMFT rule revision reduces from 5 to 2 the number of years an LMFT must be licensed in another jurisdiction to meet MN LMFT requirements.
- NOTE: Multiple licenses require the LMFT to pay multiple renewal fees; completed CEs that satisfy requirements in multiple states and – MOST IMPORTANTLY – be able to provide MFT services in multiple states in a manner that complies with each states' laws and regulations.
- Complaints relating to unlicensed/unauthorized practice likely to rise.

TELEHEALTH & YOUR LMFT LICENSE

- Minn. Rule 5300.0350, subp. 5.P. lists requirements for LMFT prior to commencing therapy through electronic means:
 - (1) ensure compliance with all relevant laws for the delivery of the services;
 - (2) determine that technologically assisted therapy is appropriate for the client, taking into account the client's physical, emotional, and intellectual needs;
 - (3) inform the client of the potential risks and benefits associated with technologically assisted therapy including, but not limited to, issues of confidentiality, clinical limitations, transmission difficulties, and ability to respond to emergencies;
 - (4) ensure the security of the communication medium; and
 - (5) only commence technologically assisted therapy after appropriate education, training, or supervised experience using the relevant technology.
- LMFT's responsibility to be competent to provide telehealth MFT. If complaint filed, burden rests with LMFT to show competence.

TELEHEALTH & YOUR LMFT LICENSE

- A MN LMFT license allows you to provide telehealth MFT services to clients physically located in MN. (MN defines practice of health care, which includes MFT, as occurring where the client is physically located. Other states may define it differently. Yes, it is confusing/frustrating.)
- MN BMFT cannot authorize MN LMFT to provide telehealth MFT in any other jurisdiction; no other jurisdiction can authorize an LMFT to provide telehealth in MN. Currently, no emergency/temporary provisions allowing MFT services to be provided by telehealth in MN by non-MN LMFT.
- Use of Insurance – irrelevant to a MN LMFT’s ability to provide telehealth in another state. Where client actually lives – irrelevant to a MN LMFT’s ability to provide telehealth in another state. Must check with that state to determine its laws re: telehealth.
- Online therapy providers issues – It’s YOUR license. Remains the LMFT’s responsibility to insure practice within license scope with every client, every time.
- MN continues to allow all postgraduate experience & all required licensure supervision may be provided electronically.

COMPLAINTS

- Primary responsibility of BMFT is to protect the public through enforcement of statutes and rules governing the practice of MFT in Minnesota. BMFT fulfills this responsibility through the complaints process.
- Complaint filings increasing: 90 complaints filed 2022; on track for more than 90 to be filed in 2023. The complaint process begins with the receipt of a written complaint.
- Information for public re: filing a complaint, complaint reporting form, and the complaint process available on [“Consumer Information”](#) page of BMFT website.
- Complaints are primarily filed by: (1) Clients; (2) Family Members; (3) Other licensed professionals; and (4) Supervisees. Other licensing boards, other state entities (DHS / MDH), law enforcement, and other states can forward complaint-related information to BMFT.
- BMFT will notify LMFT that a complaint has been filed and of the allegations in the complaint filing unless the complaint is determined to be nonjurisdictional or such notice may compromise BMFT’s investigation. The LMFT is then provided an opportunity to respond to the complaint allegations in writing.
- Investigation of complaint allegations is either handled internally (by BMFT staff) or through the Office of the Attorney General (AGO). The LMFT is notified if a referral to the AGO for investigation has occurred.

COMPLAINTS

- An Assistant Attorney General (AAG) represents BMFT in all complaint-related matters.
- LMFT – May hire an attorney to respond to complaint allegations, appear with LMFT at AGO interview or attend disciplinary conference with LMFT.
- Many complaints handled/resolved via exchange of written information only (no interviews or conferences conducted). It is important that an LMFT's initial written response to the complaint allegations be professional, accurate and thorough.
- The Complaint Review Panel is looking for the LMFT to provide documentation, including health records when relevant (statutory required and protected), explanation of decision-making process, evidence of consultation, identification of self-identified errors and subsequent correction.
- Licensure discipline, if recommended, will be memorialized in writing and the LMFT will have an opportunity to review, request revision, or decline. If declined, case will usually proceed to the Office of Administrative Hearings for administrative trial.
- Disciplinary action is always public and reported to National Practitioner's Data Bank (NPDB); Agreements for Corrective Action are public but do not constitute discipline.
- Majority of complaints dismissed without action; this does not mean the allegations were unfounded/untrue. Often the importance of a complaint investigation is the learning process for the LMFT.

COMPLAINTS

- Retaliation by LMFT to any party involved in complaint process is forbidden and can, itself be cause for disciplinary action.
- Types of disciplinary action: (1) Reprimand; (2) Conditions placed on practice; (3) Stayed Suspension with Conditions placed on practice; (4) Suspension; (5) Voluntary surrender of license; (6) Revocation; and (7) Civil Penalty.
- Frequent types of complaint allegations:
 - Boundary violations – non-sexual (more common) & sexual
 - Billing irregularities – In-person vs. telehealth; length of session; type of session
 - Records violations – failure to produce records; treating parents with legal rights to minor differently
 - Custodial-related claims – bias in parental interactions; bias in information provided in records/reports
 - Practice outside scope (increasing questions/concerns re: psychedelics)
 - False information on application or in response to request from BMFT
 - Practice and title protection violations – Use of “MFT” by unlicensed persons; providing marriage and family therapy when not licensed (increase in “coaching” practices)

SUPERVISION – Proposed Rule Changes

- Postgraduate Supervision – LMFT Board-Approved Supervision required at a rate of at least 2 hours every four weeks whenever applicant is providing direct clinical client contact.
- Supervision must be provided at an average rate of 1 supervision hour for every 20 clinical client contact hours.
- Allows supervision by a non-LMFT mental health professional for up to 50 hours of required licensure supervision. This secondary supervisor must be a mental health professional authorized to provide licensure supervision by the professional's licensure board.
- LMFT Board-Approved Supervisor and secondary supervisor must establish procedures to communicate about supervisee's practice of MFT. LMFT Board-Approved Supervisor maintains clinical responsibility for supervisee.
- All supervision may be provided electronically.
- Different standards for pre-August 1, 2016 graduates will sunset. All individuals seeking LMFT licensure required to file initial application within six months of beginning postgraduate, supervised experience.

SUPERVISOR REQUIREMENTS – Proposed Rule Changes

- Requirements to become LMFT Board-Approved Supervisor unchanged

- Creation of Secondary Supervisor:
 - ✓ Licensed in MN as a mental health professional;
 - ✓ License not subject to disciplinary or corrective action;
 - ✓ Licensed at least 4 years
 - ✓ Authorized to supervise licensure applicant by licensure board
 - ✓ Agrees to fulfill responsibilities of providing MFT supervision found in Rule 5300.0170

- LMFT Board-Approved Supervisor or Secondary Supervisor status automatically revoked if person ceases to meet qualifications or licensure requirements upon which supervisor status was based or if subject to disciplinary action impacting licensure or supervisory status

SUPERVISOR RESPONSIBILITIES – Proposed Rule Changes

Comprehensive definition of “supervision” - Taking full professional responsibility for, and control of, the quality of marriage and family therapy and related services provided by the supervisee. Supervision includes, but is not limited to, the following:

- (1) Ensuring the extent, kind and quality of therapy performed is consistent with the education, training and experience of the supervisee.
- (2) Monitoring and evaluating the supervisee’s assessment, diagnosis and treatment decisions and providing regular feedback.
- (3) Monitoring and evaluating the supervisee’s ability to provide services at the site or sites where the supervisee is practicing and to the particular clientele being served.
- (4) Monitoring and addressing clinical dynamics, including, but not limited to, countertransference, interpersonal, or trauma-related issues that may affect the supervisory or therapist-client relationship.
- (5) Ensuring the supervisee’s compliance with laws and regulations governing the practice of marriage and family therapy.
- (6) Reviewing the supervisee’s progress notes, process notes or other patient treatment records, as deemed appropriate by the supervisor.
- (7) With the client’s written consent, providing direct observation or review of audio or video recordings of the supervisee’s therapy, as deemed appropriate by the supervisor.

SUPERVISOR RESPONSIBILITIES – Proposed Rule Changes

- Supervisor must maintain a supervision record for a supervisee. The record must include:
 - ✓ Completed statement of supervisor responsibility on a form promulgated by BMFT;
 - ✓ Copy of any supervision agreement or contract setting forth requirements of supervisory relationship
 - ✓ Dated record of each supervision session which includes any specific issue identified and discussed which may prevent supervisee from meeting a reasonable standard of care in providing marriage and family therapy
 - ✓ Record of any LMFT or secondary supervisor providing concurrent licensure supervision
- Supervisor must be knowledgeable of current clinical skills required to provide MFT services and current MFT literature, including ethics, evidence-based standards of practice, cultural competency and supervision skills

CONTINUING EDUCATION

- December 2023 – CE Reporting Year! Check Continuing Education info on BMFT website! All LMFTs required to complete Ethics CE (3 hours if licensed prior to 1/1/23) and Cultural Competency CE (4 hours if licensed prior to 1/1/23). Supervision CE (4 hours) required of all LMFT Board-Approved Supervisors.
- Proposed Rule Changes: Reduces from 5 to 2 the number of years an LMFT must retain CE documentation after conclusion of a 2-year CE reporting period.
- Eliminates requirement for BMFT approval of continuing education programs. Eliminates the LMFT Application for CE Course Approval (effective for 2024-2025 CE reporting period).
- LMFT may file application for CE course approval with \$60 fee if seeking assurance that a program qualifies as appropriate LMFT continuing education.
- Program Sponsor CE application remains; BMFT-approved programs continue to be listed on BMFT website.

VARIANCES

WHAT IS AN ADMINISTRATIVE VARIANCE? WHY & HOW WOULD I REQUEST ONE?

Minn. Rule 5300.0340 - VARIANCE

1. Licensee or applicant may request relief only from an administrative rule (*not* a statute or rule incorporating statute); request form on website
2. Standards for granting variance:
 - Rationale for rule can be met by specified alternate practice
 - Adherence to rule imposes an undue burden on licensee/applicant
 - Granting of variance will not adversely affect public welfare
3. Relief generally granted prospective only
4. Financial burden usually insufficient to support granting of variance
5. Variance should tell a story and provide sufficient information to support how circumstances create applicant's need for relief

Common requests: LAMFT license extension; taking MFT National Exam more than 5 times; approved supervisor status prior to meeting rule requirement; use of a non-LMFT approved supervisor; logging more than 100 hours supervision in a 12-month period; logging hours more than 6 months prior to initial application

FEE CHANGES

Type of Fee	Prior Fee	New Fee
LAMFT Renewal Fee – Effective January 1, 2024	\$75.00	\$100.00
LAMFT – Late Renewal Fee – Effective January 1, 2024	\$25.00	\$50.00
LMFT Renewal Fee – Effective November 1, 2023	\$125.00	\$175.00
LMFT – Late Renewal Fee – Effective Nov. 1, 2023	\$50.00	\$100.00
Emeritus License Fee – Effective November 1, 2023	\$125.00	\$225.00

TIMELINE / RECAP

- LMFT Renewal Fee & Late Fee Increase – 2023
- LAMFT Renewal Fee & Late Fee Increase – 2024
- Proposed rules slated for adoption – 2024 (dependent upon a variety of factors involving Office of the Revisor of Statutes, Office of the Governor, Office of Administrative Hearing)
- Transition to online LMFT State Exam – 2024
- Transition to online licensure applications – 2024/25
- Reconfiguration of the LAMFT/LMFT licensure process – 2024

THANK YOU! / QUESTIONS?