



*Stakeholder Input Regarding Part Y of Chapter  
57 of the Laws of 2018 relating to the practice of  
Psychology, Social Work and Mental Health  
Practitioners in certain settings*

*Submitted by, the New York Mental Health  
Counselors Association and the National Association  
for the Advancement of Psychoanalysis*

*Thursday, August 9, 2018*

On behalf of the New York Mental Health Counselors Association (NYMHCA) and the National Association for the Advancement of Psychoanalysis (NAAP), we would like to submit the following comments and recommendations to the New York State Education Department relating to Part Y of Chapter 57 of the laws of 2018, which amends the psychology, social work and mental health practitioners professions.

## OVERVIEW

NYMHCA and NAAP have long held the position that the program and service exemption established in Article 163 was a temporary measure to allow the State and providers of vital mental health services the ability to transition their programs in compliance with licensure requirements. As the exemption continued to be extended, more and more licensed mental health counselors (LMHC) and licensed psychoanalysts (LP) were employed by exempt program and service providers to provide clinical mental health services, including diagnosis, within a flexible service model that was unrestricted by licensure laws. However, even with increased employment and flexibility, LMHCs and LPs believe that the standards of licensure should be upheld in all settings and are pleased the law has been amended to allow the exemption to sunset. In addition, we are pleased that the law recognizes the workforce challenges facing the public and not-for-profit mental health care delivery system and has allowed for the development of guidance documents and regulations with the input of stakeholders.

NYMHCA and NAAP are pleased that grand-parenting language was included to allow “any person who is employed or who commences employment in a program or service...” to continue be unrestricted. This provision provides the necessary flexibility to allow employers to maintain LMHCs and LPs in their current roles and continue to provide the necessary services to individuals in care.

As you know, the scope of practice for the LMHC and LP does not include the authority to diagnose. NYMHCA and NAAP believe that if the requirements for licensure were amended to reflect the clinical standards required by Licensed Clinical Social Workers (LCSW) these two professions would meet the qualifications established to diagnose. Amendments to Article 163 would be necessary to ensure that the educational requirements included twelve credit hours in clinical instruction and at minimum two thousand hours of direct client contact in diagnosis and psychotherapy. Senator Helming and Assembly DenDekker have introduced legislation on our behalf to make these changes and extend diagnostic authority to LMHCs and LPs [S.6582A/A.8757A]. We believe that increasing the number of qualified providers who are able to independently diagnose and provide psychotherapy will help alleviate some of the workforce challenges experienced by providers.

The law creating LMHCs and LP was signed in 2002. To this date, civil service titles have not been established for these professions. Our members have repeatedly reported challenges in employment and internship opportunities because of the lack of civil services titles specific to the profession. We believe that the establishment of civil service titles that reflect the

professions will clarify the requirements for LMHCs and LP and establish a clear role for them in the public mental health care system.

Thank you for the opportunity to provide comments regarding the expiration of the exemption. We are available to discuss the comments provided or any other area of importance to this issue.

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