## **BEHAVIORAL HLTH & THERAPY BD**

Agency Profile

## **Agency Purpose**

The Minnesota Board of Behavioral Health and Therapy regulates the practice of professional counseling and alcohol and drug counseling in Minnesota. Minnesota Statutes sections 148B.50-148B.593 require the Minnesota Board of Behavioral Health and Therapy to license professional counselors (LPCs) and Licensed Professional Clinical Counselors (LPCcs) and to regulate the practice of professional counseling in the State of Minnesota. Minnesota Statutes chapter 148C requires the Board of Behavioral Health and Therapy to license alcohol and drug counselors (LADCs), issue temporary permits to practice alcohol and drug counseling, and regulate the practice of alcohol and drug counseling in Minnesota. The board was established in May 2003. On July 1, 2005, the board began licensing and regulating licensed alcohol and drug counselors (LADCs) when the program transferred to the board from the Department of Health.

The board's mission is to protect the public through effective licensure and enforcement of the statutes and rules governing the practices of professional counseling and alcohol and drug counseling to ensure a standard of competent and ethical practice.

## At a Glance

Minnesota LADC, LPC and LPCC Statistics as of June 30, 2010:

#### Licensing Services

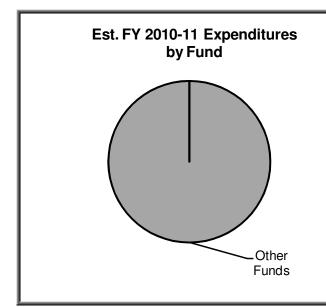
- 2142 Licensed Alcohol and Drug Counselors
- 143 ADC Temporary Permit Holders
- 557 Licensed Professional Counselors
- 170 Licensed Professional Clinical Counselors
- Annual renewals processed for all LPCs, LPCCs, and ADC permit holders
- Biennial renewals processed for LADCs
- 75 new LPC/LPCC Licensure Supervisor Applications processed annually
- 25 Sponsor Applications for LADC Continuing Education Activities processed annually
- 120 Sponsor Applications for LPC/LPCC Continuing Education Activities processed annually.

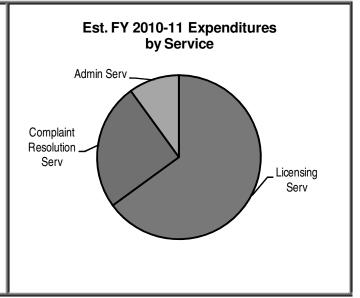
#### Complaint Resolution Services

- Investigate jurisdictional complaints of applicants and licensees who violate the practice acts
- 168 complaints received between July 1, 2008 and June 30, 2010
- 207 complaints resolved between July 1, 2008 and June 30, 2010
- Three disciplinary actions taken
- Monitor licensees under disciplinary order
- Assure monitoring of licensees in Health Professional Services Program

#### Staff

• 3.0 full time equivalent employees





Source: Consolidated Fund Statement.

Source: Board expenses allocated to the services provided by the board.

## **Strategies**

The Board of Behavioral Health and Therapy is a regulatory agency and accomplishes its public protection mission by:

- setting and administering minimum educational, supervision, and examination requirements for initial licensure as a licensed professional counselor, licensed professional clinical counselor, or alcohol and drug counselor;
- setting and administering requirements for renewal of licensure;
- setting standards of ethical practice;
- responding to inquiries, complaints and reports regarding applicants and licensees;
- investigating complaints of alleged violations of statutes and rules, holding educational and disciplinary conferences with licensees, and taking legal action (disciplinary or corrective action) when appropriate against licensees who fail to meet minimum standards of practice:
- approving continuing education activities; and
- providing information about licensure requirements and standards of practice to applicants and licensees, the
  public and other interested parties.

## **Operations**

The 13-member board consists of five licensed professional counselors, five licensed alcohol and drug counselors, and three public members appointed by the Governor. The board has three full time staff members to perform the administrative duties necessary to regulate these professions.

The board holds quarterly board meetings, and subcommittees of the board meet regularly to review license applications and licensure issues (Application and Licensure Committee), draft rules (Policy and Rules Committee), draft legislation (Legislative Committee), review complaints and hold educational and disciplinary conferences with applicants and licensees (Complaint Resolution Committee), and perform other duties required for the operation of the board.

#### **Licensing Services:**

- Initial Licensure: board staff members and members of the Application and Licensure Committee review, approve and process initial license applications. Application review is ongoing and licenses are issued monthly.
- License Renewals: In August 2010, online renewal services became available for LADCs for the first time. A
  significant number of licensees opted to renew online, but final data is not yet available on the total
  percentage of licensees who renewed online. By December 31, 2010, online renewal services will be
  available for LPCs and LPCCs. Online renewals will streamline the renewal process for both licensees and
  board staff.
- Other online services will eventually include license verification, address and contact information changes, and online data services (mailing lists, statistical data, etc.).
- The BBHT website includes information about board members, board staff, public meeting notices, and current issues affecting the board. Initial licensure application forms, continuing education sponsor application forms and instructions, supervisor application forms, and LADC and LPC/LPCC statutes and rules are printable from the website.
- Board staff members provide licensure information and public information by answering telephone calls, responding to email inquiries, and meeting with walk-in customers.
- Board staff members review and approve applications for continuing education course approval.
- Board staff members make annual presentations to counselor education programs and professional associations.

#### **Complaint Resolution Services:**

 Public protection is provided through investigating complaints, taking disciplinary or corrective action against licensees who violate the practice acts, and monitoring licensees under disciplinary orders and agreements for corrective action. The board's website provides information to the public about complaints and discipline, including information
on the complaint process, complaint registration forms, and a list of disciplinary and corrective actions taken
by the board.

## **Key Activity Goals & Measures**

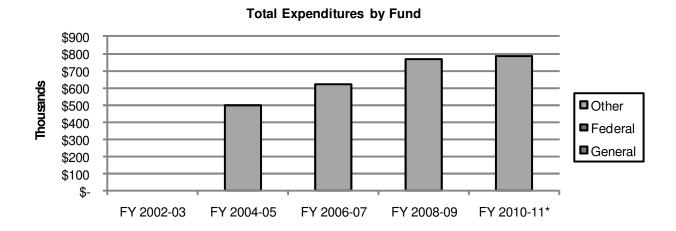
## Create more cost-effective and efficient licensure processes.

- Continue work that began in the 2010 legislative session to repeal existing LADC statutes and rules and rewrite the practice act for licensed alcohol and drug counselors. The rewrite will clarify and simplify existing statutory and rule language, with the goal of making board operations more efficient, resulting in cost savings. It removes confusing, obsolete, repetitive, and unnecessary language and creates licensure processes and regulatory language for LADCs that are consistent with those of other health licensing boards. Continue to work with representatives from the Minnesota Association of Resources for Recovery and Chemical Health (MARRCH) (the professional association for LADCs), Minnesota Coalition of Addiction Studies Educators (MNCASE), Minnesota Certification Board (MCB) (the exam entity), Minnesota Association of Treatment Providers (MATP), and the Department of Human Services to get this legislation passed in the 2011 session.
- Complete contract with database consultant by December 31, 2010, or as soon thereafter as possible, for the
  development and implementation of a comprehensive database for all of the Board's licenses and processes.
  The database will include the ability for at least the following online services: license renewals, license
  verifications, name and address changes; data services capabilities to generate mailing lists and statistical
  reports, and eventually initial licensure applications.
- Fill a clerical position that has been vacant for more than four years to improve customer service and application processing time.

## **Budget Trends Section**

The board is responsible for collecting sufficient revenue to cover both direct and indirect expenditures. The board is estimated to collect \$1,616,000 in FY 2010-11, which is deposited as non-dedicated revenue into the state government special revenue fund.

From this fund, the board receives a direct appropriation to pay for agency activities such as salaries, rent, costs for disciplinary/contested cases and operating expenditures. It also pays statewide indirect costs through an open appropriation. In FY 2010-11, total expenditures for these purposes are estimated at \$788,000. The chart below shows funding trends over the last five biennia for the direct and open appropriation.



\*FY 2010-11 is estimated, not actual Source data for the previous chart is the Minnesota Accounting and Procurement System (MAPS) as of 07/31/10.

Board fees are also responsible for covering a prorated share of support functions provided outside of the Board itself. These include legal support (Attorney General), statewide e-licensing system development and operations

(Office of Enterprise Technology), centralized administrative support (Health Boards Administrative Services Unit) and funding for services to health professionals (Health Professionals Services Program). In FY 2010-11, some of the health boards' reserves in the state government special revenue fund were also transferred to the general fund. The table below displays direct and open appropriation expenditures, external support costs (prorated share), and the general fund transfers (prorated share) estimated in FY 2010-11.

Board's Direct and Open Appropriations Board's External Support Costs and Transfers (prorated Share)	FY 2010-11 (in thousands) \$ 788		
Attorney General support	147		
E-licensing support	29		
Central administrative service unit	41		
<ul> <li>Health professional service program</li> </ul>	22		
General fund transfer	0		
Total	1,027		
Fees Collected by Board	\$1,616		
Prorated Surplus/(Deficit)	589		

In most years, Board fee revenues exceed direct expenditures and external support costs, and as directed by law, the surplus is used to maintain a reserve in the state government special revenue fund.

## **External Factors Impacting Agency Operations**

The number of licensees regulated by the Board continues to rise, as do the number of complaints and the complexity of the cases.

#### Contact

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	Dollars in Thousands				
	Current		Forecast Base		Biennium
	FY2010	FY2011	FY2012	FY2013	2012-13
Direct Appropriations by Fund				i !	
State Government Spec Revenue					
Current Appropriation	394	394	394	394	788
Forecast Base	394	394	394	394	788
Change		0	0	0	0
% Biennial Change from 2010-11				 	0%
Expenditures by Fund		I		;	
Direct Appropriations					
State Government Spec Revenue	301	487	394	394	788
Total	301	487	394	394	788
Expenditures by Category				1	
Total Compensation	246	263	278	289	567
Other Operating Expenses	55	224	116	105	221
Total	301	487	394	394	788
Expenditures by Program				}	
Behaviorial Health & Therapy	301	487	394	394	788
Total	301	487	394	394	788
Full-Time Equivalents (FTE)	4.1	3.8	4.0	4.0	

# Agency Revenue Summary

Dollars in Thousands

	Actual FY2010	Budgeted FY2011	Currer FY2012	nt Law FY2013	Biennium 2012-13
Non Dedicated Revenue:					
Departmental Earnings:					
State Government Spec Revenue	762	852	729	832	1,561
Other Revenues:					
State Government Spec Revenue	(30)	0	0	0	0
Total Non-Dedicated Receipts	732	852	729	832	1,561
Dedicated Receipts:					_
Total Dedicated Receipts	0	0	0	0	0
Agency Total Revenue	732	852	729	832	1,561