



# Texas Department of State Health Services

Texas State Board of Examiners of Dietitians

Texas State Board of Examiners of Marriage and Family Therapists

Texas Midwifery Board

Texas State Board of Examiners of Perfusionists

Texas State Board of Examiners of Professional Counselors

Texas State Board of Social Worker Examiners

## Agency at a Glance

The state boards that license dietitians, marriage and family therapists, midwives, perfusionists, licensed professional counselors, and social workers are housed within the Department of State Health Services (DSHS), which serves as an umbrella licensing agency for these and other health licensing programs. Each board, with the exception of the Midwifery Board, is an independent Governor-appointed board that creates rules to enforce the Acts and determine appropriate administrative penalties for licensees who violate laws or rules. DSHS provides all administrative services and staff to license applicants, and process complaints and administrative penalties. The Midwifery Board serves as an advisory board and is appointed by the Health and Human Services Commission Executive Commissioner. Proposed rules must be approved by the State Health Services Council (SHSC) and the Executive Commissioner before adoption by the Midwifery Board.

All the boards seek to protect the public by ensuring that these health service licensees are qualified, competent, and adhere to established professional standards. The table, *Persons Licensed by DSHS Health Licensing Boards*, lists the number of licensees under each board's jurisdiction.

<i>Persons Licensed by DSHS Health Licensing Boards - FY 2004</i>	
<i>Board</i>	<i>Licensees</i>
Dietitian	3,697
Marriage and Family Therapist	2,944
Midwifery	165
Perfusionist	299
Professional Counselor	16,247
Social Worker	21,260



*For additional information, please contact Steve Hopson at 512-463-1300.*

## Key Facts

- **DSHS Functions.** The Department of State Health Services has adopted a functional organization approach to servicing the six health licensing boards under Sunset review. Under this approach DSHS provides consolidated services for licensing, enforcement, and board support rather than dedicating specific staff that work only on a single licensing program. DSHS assigns 21 full-time employees to these boards with a total budget of \$1.4 million.

- **Dietitians.** The 3,700 dietitians licensed by the State Board of Examiners of Dietitians are experts in nutrition science who specialize in menu planning, supervision of food preparation, diet therapy, nutrition research, counseling, and nutrition education. The Licensed Dietitian Act is a title act that restricts providers of nutritional advice from referring to themselves as licensed or registered dietitians unless they are licensed by the Dietitian Board or registered by the Commission on Dietetic Registration. The Dietitian Board received two complaints in fiscal year 2004.
- **Marriage and Family Therapists.** The State Board of Examiners of Marriage and Family Therapists licenses about 3,000 marriage and family therapists who are mental health professionals trained in psychotherapy and family systems. The approach to this profession renders therapeutic services to individual clients or groups, and involves the application of family systems theories. About 90 percent of marriage and family therapists also hold a license as a professional counselor or social worker. Religious practitioners and other licensed professionals such as doctors, nurses, and social workers are not required to be licensed by the Marriage and Family Therapist Board to perform counseling. The Marriage and Family Therapist Board received 45 complaints in fiscal year 2004.
- **Midwives.** Midwives deliver babies at the mother's home or at licensed birthing centers using a non-medical model of care that de-emphasizes medical intervention. The Texas Midwifery Board licenses 165 direct entry, documented midwives while the Board of Nurse Examiners licenses certified nurse midwives. The Midwifery Board also licenses the three midwifery education programs in Texas and received 24 complaints concerning midwives in fiscal year 2004.
- **Perfusionists.** Perfusionists operate cardiopulmonary bypass equipment to maintain and monitor a patient's vital heart and lung functions during open-heart surgeries. The State Board of Examiners of Perfusionists licensed about 300 perfusionists and received no complaints in fiscal year 2004. The Perfusionist Board requires all licensees to be certified by the American Board of Cardiopulmonary Perfusion.
- **Licensed Professional Counselors.** The 16,300 counselors licensed by the State Board of Examiners of Professional Counselors use their specialized training in psychotherapy, human development, and counseling, to diagnose and treat mental and emotional disorders, assist individual clients to overcome life challenges and promote wellness, personal growth, and career development. Religious practitioners and other licensed professionals such as doctors, nurses, and social workers are not required to be licensed by this board to perform counseling. The Professional Counselor Board received 162 complaints in fiscal year 2004.
- **Social Workers.** The State Board of Social Worker Examiners licenses about 22,000 social workers who apply the theory, knowledge, methods, and ethics of social work to restore or enhance the functioning of individuals, couples, families, groups, organizations, and communities. Social workers apply social work values, principles, and methods, that include assessment, evaluation, case management, counseling, marriage and family therapy, and psychotherapy. The Social Worker Board received 111 complaints in fiscal year 2004.

## State Board of Examiners of Dietitians (9)

Ralph McGahagin, Chair (Austin)  
Carol Barnett Davis (Dallas)  
Linda Whitnell Dickerson (Lake Jackson)  
Lucinda Montemayor Flores (Brownsville)  
Georgiana S. Gross (San Antonio)

Janet Suzanne Hall (Georgetown)  
Claudia L. Lisle (Amarillo)  
Amy Nicholson McLeod (Lufkin)  
Eugene E. Wisakowsky (Waxahachie)

### Agency Head

Bobbe Alexander, Executive Secretary  
(512) 834-6677

## State Board of Examiners of Marriage and Family Therapists (9)

Marvarene Oliver, Ed.D., LMFT, Chair  
(Corpus Christi)  
Simon Aguilar (Lufkin)  
Joe Ann Clack (Missouri City)  
Sandra DeSobe, LMFT (Houston)  
Waymon Hinson, Ph.D., LMFT (Abilene)

Reverend B. W. McClendon (Austin)  
Brenda VanAmburgh, Ph.D., LMFT  
(Fort Worth)  
Bishop William H. Watson (Lubbock)  
Jackie M. Weimer, LMFT (Plano)

### Agency Head

Andrew Marks, Executive Director  
(512) 834-6657

## Texas Midwifery Board (9)

Brent Baylor, Chair (Victoria)  
Susan Chick (Round Rock)  
Thalia Hufton (Tyler)  
Gail Winters Johnson (Hurst)  
Lisa R. Nash, D.O. (Galveston)

Barry E. Schwarz, M.D. (Dallas)  
Cynthia Scott (Dallas)  
Karen Strange (Garland)  
Vacancy

### Agency Head

Yvonne Feinleib, Midwifery Program Director  
(512) 834-4523

## State Board of Examiners of Perfusionists (9)

Thomas Kurt Wilkes, Chair (Lubbock)  
H.B. Bell (Dallas)  
Debra Sue Douglass (Grapevine)  
Gaye Jackson (Houston)  
Scott Bostow Johnson, M.D. (San Antonio)

Guadalupe M. "Lupita" Mendez (San Antonio)  
Steven A. Raskin (Richmond)  
Thomas A. Rawles (Plano)  
Sheila M. Tello (Corpus Christi)

### Agency Head

Bobbe Alexander, Executive Secretary  
(512) 834-6677

## **State Board of Examiners of Professional Counselors (9)**

Judith Powell, Chair (The Woodlands)  
Ana C. Bergh (Edinburg)  
Diane Johnson Boddy (Henrietta)  
James Castro (San Antonio)  
Glynda Corley (Round Rock)

Michelle A. Eggleston (Amarillo)  
Alma G. Leal (Rancho Viejo)  
J. Helen Perkins (DeSoto)  
Dan F. Wilkins (Center)

### **Agency Head**

Bobbe Alexander, Executive Director  
(512) 834-6677

## **State Board of Social Worker Examiners (9)**

Jeannie M. McGuire, LBSW, Chair (College Station)  
Holly Anawaty (Houston)  
Timothy M. Brown (Bryan)  
Lt. Willie McGee, Jr. (Plainview)  
John Steven Roberts, LCSW (Austin)

Matt Shaheen (Plano)  
Julia Ann Stokes (Fort Worth)  
Jamie B. Ward, LBSW (Tyler)  
Carrie Yeats, LMSW (Lubbock)

### **Agency Head**

Andrew Marks, Executive Director  
(512) 834-6657

## **Recommendations**

1. Replace the Independent, Governor-Appointed Perfusionist Board With an Advisory Committee.
2. Eliminate the Texas-Specific Exam for Professional Counselors and Update Other Licensing Requirements to Improve Interstate Movement of Professional Counselors.
3. Conform Key Elements of the Boards' Licensing and Regulatory Functions to Commonly Applied Licensing Practices.
4. Change the Statutory Designation of Documented Midwife to Licensed Midwife.
5. Add Greater Representation of Midwives to the Midwifery Board.
6. Continue Regulation of Dietitians, Marriage and Family Therapists, Midwives, Perfusionists, Professional Counselors, and Social Workers With Independent Boards or Advisory Committees at the Department of State Health Services for 12 Years.

## ***Issue 1***

---

### **The Regulation of Perfusion Does Not Require an Independent Policy Board to Oversee the Profession.**

#### **Key Findings**

- Functions of the Perfusionist Board are not needed to protect public health and safety.
- The limited activities of the Perfusionist Board are highlighted by the Board's infrequent, short meetings.
- Other licensing programs gain needed expertise through advisory committees rather than through an independent board.

The Texas State Board of Examiners of Perfusionists is an independent, Governor-appointed board within the Department of State Health Services (DSHS). The Perfusionist Board's licensing process is handled by DSHS, the rules governing the practice of perfusion are written and need few updates, and the Board hears few enforcement cases. This limited workload results in the need for infrequent, short meetings. Because the Perfusionist Board has largely achieved its original objectives, the Board is not needed as currently constituted to oversee the profession.

#### **Recommendation**

##### **Change in Statute**

##### **1.1 Replace the independent, Governor-appointed Perfusionist Board with an advisory committee.**

This recommendation would abolish the current Perfusionist Board, eliminating the nine unnecessary gubernatorial appointments, and create an advisory committee in its place. The five-member Perfusionist advisory committee would be appointed by the State Health Services Council and give advice to the Executive Commissioner of the Health and Human Services Commission on rulemakings and enforcement actions, when needed.

## ***Issue 2***

---

### **The Licensed Professional Counselor Act Limits the Ability of Professional Counselors to Practice in Other States.**

#### **Key Findings**

- State regulation of professional counseling controls who may provide counseling services in Texas.
- State regulations limit the ability of Texas professional counselors to practice in other states.
- Out-of-state licensees find it difficult to gain Texas licensure.
- Other states that license professional counselors use a national exam and have begun to achieve greater portability of professional counselor licenses.

The Licensed Professional Counselor Act seeks to protect the public through licensing requirements for professional counselors. However, current licensing requirements impair national portability — the ability of Texas licensees to transfer their license easily to other states, and out-of-state licensees to gain licensure in Texas.

## Recommendations

### Change in Statute

#### **2.1 Remove the Professional Counselor Board's authority to develop a separate state exam.**

This recommendation would increase national portability for Texas licensees who wish to be licensed in another state, and for out-of-state licensees who seek licensure in Texas by removing the Professional Counselor Board's authority to write its own exam, and requiring the Board to contract with a nationally recognized organization to develop and administer the exam.

#### **2.2 Remove the statutory provision that requires a licensed professional counselor to have 48 graduate hours to qualify for a license.**

Under this recommendation the Professional Counselor Board would have authority to determine the number of graduate hours necessary for licensure. The current requirements for applicants to have a graduate degree with 48 hours from an accredited institution of higher education would be removed to grant the Board flexibility to change the number of required hours to track national trends. The law would still require applicants to have a graduate degree with a 3,000 clock hour supervised internship.

### Management Action

#### **2.3 The Professional Counselor Board should replace the Texas exam with a national exam administered by the National Board of Certified Counselors.**

This recommendation would instruct the Professional Counselor Board to consider using a national exam administered by the National Board of Certified Counselors (NBCC). NBCC has two exams, but Texas should consider using the exam that tests the core principles, as that exam most closely matches the content of the current state exam. Since most of the 47 other states that license professional counselors also use this exam, and it would allow for greater portability of the license.

#### **2.4 The Professional Counselor Board should simplify the process for a licensed professional counselor, who holds an active license in another state, to be licensed in Texas.**

This recommendation would direct the Professional Counselor Board to create rules increasing the portability of licensees into the State while ensuring that licensees possess sufficient qualifications to justify the license. The Board should consider accepting a graduate degree regardless of the number of graduate hours from out-of-state applicants currently licensed in their state of origin, if the Board determines the applicant possesses sufficient qualifications to justify a waiver. The number of graduate hours required for licensure has increased in many states since the creation of the license, and this recommendation would allow out-of-state applicants to transfer their licenses easily without returning to school to earn additional graduate hours.

### Key Elements of the Boards' Licensing and Regulatory Functions Do Not Conform to Commonly Applied Licensing Practices.

#### Key Findings

- Licensing provisions of the boards' statutes do not follow model licensing practices and could potentially affect the fair treatment of licensees and the boards' ability to protect consumers.
- Nonstandard enforcement provisions of the boards' statutes could reduce the boards' effectiveness in protecting consumers.
- Certain administrative provisions of the boards' statutes conflict with standard practice, potentially reducing the boards' efficiency.

Over the past 25 years, the Sunset Commission has reviewed more than 80 occupational licensing agencies, and has identified standards that are common practices throughout the agencies' statutes, rules, and procedures. Various licensing, enforcement, and administrative processes of the boards that license dietitians, marriage and family therapists, midwives, perfusionists, licensed professional counselors, and social workers do not match these model licensing standards statutes, rules, and practices. For example, the lack of some enforcement tools for these boards may affect the State's ability to protect the public from practitioners who violate state laws or board rules. Comparing these boards' regulatory practices and statutes to these licensing standards identified variations and needed changes to bring them in line with model standards.

#### Recommendations

##### Licensing

##### Change in Statute

#### 3.1 Clarify that the six boards must address felony and misdemeanor convictions in the standard manner defined in the Occupations Code.

This recommendation would clarify the six boards' authority regarding rules that follow the general guidelines in Chapter 53 of the Occupations Code for dealing with criminal convictions by requiring them to develop rules defining the specific crimes they believe affect a potential licensee's ability to practice. As advisory boards on rules, the Midwifery and Perfusionist boards would develop these rules for final approval by the Executive Commissioner of the Health and Human Services Commission.

#### 3.2 Remove exemptions from temporary licensure requirements from the Licensed Professional Counselor Act.

This recommendation would remove two provisions permitting the issuance of temporary permits to applicants who have not completed the required number of graduate semester hours. The first provision allows a person to receive a temporary license to practice art therapy before completing the required number of graduate hours, while the second provision permits a person to complete the required hours while simultaneously completing the supervised internship. These changes would clarify that the Professional Counselor Board has the authority to issue a temporary license only if the applicant has met specified educational requirements.



### **3.3 Remove subjective examination provisions from the Marriage and Family Therapist and Professional Counselor boards' statutes.**

This recommendation would remove the authority for the Marriage and Family Therapist and the Professional Counselor boards to use a field exam, and remove the Marriage and Family Therapist Board's authority to use an oral exam. To qualify for a license, the boards would require passage of a written exam.

### **3.4 Require applicants to the six boards to pass a jurisprudence exam as a condition of licensure.**

This recommendation builds on existing licensure requirements by requiring all of the boards' applicants to pass a jurisprudence exam to be eligible for licensure. The boards would need to develop an examination based on their licensing act and rules, and other applicable state laws and regulations affecting professional practice. The boards would have the flexibility to design and administer the exams to minimize impact on the licensees. The boards would also develop rules regarding examination development, fees, administration, re-examination, grading, and notice of results.

### **3.5 Require the Midwifery Board to provide timely notice of exam results.**

The Midwifery Board would be required to provide timely notice of exam results and analysis to individuals failing the exam. The change would require the boards to notify examinees of their results not later than 30 days after they took the exam, or 14 days after receiving the results from a testing service.

### **3.6 Remove exemptions from the Marriage and Family Therapist, Perfusionist, Licensed Professional Counselor, and Social Worker acts for non-Texas residents to practice without temporary licensure.**

This recommendation would prevent unlicensed marriage and family therapists, perfusionists, licensed professional counselors, and social workers from practicing in the state without receiving a temporary license to ensure minimum competency to practice. Practitioners from other states would no longer be able to practice in Texas without qualifying under state law.

### **3.7 Require the boards to base delinquent license renewal fees on the normally required renewal fee, and require midwives and perfusionists whose licenses are delinquent more than one year to reapply for licensure.**

The renewal fee for the six boards' licensees who are delinquent in renewing their licenses would be based on the normal renewal rate set by the boards, not the examination fee. To renew a license that has been expired for 90 days or less, the renewal fee would be equal to 1-1/4 times the renewal fee, which would account for the increased fee that will result from a pending change to biennial renewals. If the license has been expired for more than 90 days, but less than one year, the renewal fee would equal 1-1/2 times the renewal fee. Also, midwives and perfusionists who have allowed their licenses to be expired for one year or more may not renew but must obtain a new license by complying with all requirements for obtaining an original license. These recommendations would not be implemented until September 1, 2007, to allow full implementation of the current shift to biennial renewal. Further, because of fiscal considerations, the Social Worker Board statute would need to specify that the current late renewal fee would remain in effect until such time that the new renewal fee approach would result in an increased late fee.



## **Enforcement**

### **Change in Statute**

#### **3.8 Limit the Midwifery Board from having rules restricting advertising or competitive bidding by a license holder.**

Adding this former Sunset across-the-board recommendation to the Midwifery Act would prohibit the Board from having rules that restrict licensees' advertising or competitive bidding except to prohibit false, misleading, or deceptive practices.

#### **3.9 Require the boards to include a public member on complaint committees.**

Under this recommendation, the boards would be required in statute to include a public member on board committees that review enforcement cases. While all of the boards currently meet this requirement, enacting the provision in statute would ensure its continuation. This requirement would not apply to the Perfusionist Board as its enforcement will be handled administratively by the Department of State Health Services as overseen by the Executive Commissioner of the Health and Human Services Commission.

#### **3.10 Authorize the Dietitian, Marriage and Family Therapist, Midwifery, Perfusionist, and Social Worker boards to refuse to renew a license as an administrative sanction.**

This recommendation would add an extra enforcement tool for these five boards, allowing the boards to better fit punishments to infractions. This recommendation would also provide for clear authority to deny license renewal for those who do not pay outstanding administrative fines.

#### **3.11 Increase the maximum administrative penalty of the Marriage and Family Therapist, Midwifery, and Social Worker boards to \$5,000 per violation, per day.**

This recommendation would make all six boards' maximum administrative penalty amount uniform by increasing the three boards' amounts to \$5,000 per violation, per day. As a cap, the maximum penalty would be applied only to the most serious offenses.

#### **3.12 Require the Dietitian, Perfusionist, and Professional Counselor boards to have penalty matrices with dollar amounts associated with violations.**

The Dietitian Board would be required to adopt a penalty matrix in rule, including dollar amounts tied to each violation. The Executive Commissioner of the Health and Human Services Commission would be required to adopt a similar rule for the Perfusionist Board. The Professional Counselor and Social Worker boards would be required to modify their existing matrices to include the dollar amounts.

#### **3.13 Authorize the boards to require refunds as part of the settlement conference process.**

The boards would be allowed under this recommendation to include refunds as part of an informal settlement conference on a disciplinary case. Authority would be limited to ordering a refund not to exceed the amount the consumer paid the licensee. Any refund offer would not include an estimation of other damages or harm. The refund may be in lieu of, or in addition to, a separate board order assessing an administrative penalty.

**3.14 Authorize the Dietitian Board to seek an injunction against persons holding themselves out as dietitians without a license.**

Under this recommendation, the Dietitian Board would be able to seek an injunction, through the Attorney General in district court, against individuals who use the title of licensed dietitian without being duly licensed by the Board.

**3.15 Authorize the six boards to issue cease-and-desist orders against unlicensed activity.**

The boards would issue cease-and-desist letters when they receive complaints or otherwise learn of an individual practicing or using a title without a license. This recommendation would also authorize the boards to assess administrative penalties against persons who violate cease-and-desist orders. The boards would still be authorized to refer these cases to local law enforcement agencies or the attorney general for prosecution.

**Management Action**

**3.16 The boards should use complaint trend analysis to address recurring problems.**

The boards would be required to use complaint trend analyses already compiled by Department of State Health Services to target their resources toward recurring problems. The boards should also include non-jurisdictional complaints in the trend analyses to get a complete picture of the public's problems with these general areas of regulation.

**3.17 The Midwifery and Social Worker boards should establish, by rule, methods to notify consumers about the boards for complaint purposes.**

The Midwifery and Social Worker boards should develop more specific rules, as currently required by statute, to notify consumers about their boards in case of complaints against licensees. The statutes specify that notification must include the name, mailing address, and telephone number of the boards; and may be placed on registration forms, signs in licensees' offices, or on bills for services.

**Administration**

**Change in Statute**

**3.18 Remove provisions allowing board members to receive payments for attendance at meetings.**

This recommendation would remove obsolete provisions permitting Dietitian, Marriage and Family Therapist, Midwifery, Perfusion, and Professional Counselor board members to receive payments for each board meeting attended.

**3.19 Clarify the boards' authority to appoint board committees, but only comprised of board members, and remove statutory authority for the Professional Counselor Board to delegate its authority to a single member.**

This recommendation would establish that while the boards may have committees, they may only consist of board members. The recommendation would also delete a provision permitting the Professional Counselor Board to delegate authority to one member. As an advisory board, the Perfusionist Advisory Committee would not be subject to this recommendation.

## Management Action

### 3.20 The boards should improve the information they provide to the public.

This recommendation would require the boards to distribute information about their professions, produced by the boards, to consumers, both in print and online. In addition, the Marriage and Family Therapist, Professional Counselor, and Social Worker boards would produce a brochure, separate from those describing individual boards, explaining the differences between the three mental health fields. The brochure would not specify which profession's services are most appropriate to a particular consumer's needs. Finally, this recommendation would require the boards to assess their public information annually to ensure that it remains current and accurate enough to be of assistance to consumers and the general public.

## *Issue 4*

---

### The Statutory Designation of Documented Midwife May Confuse the Public.

To provide midwifery services in Texas as a documented midwife, a person must meet education, examination, and renewal requirements similar to other licensed professionals. While the regulation of documented midwives reaches a level typical of full licensure, the term, documented midwife, may confuse consumers and the public regarding the level of regulation. No other state refers to its licensed midwives as documented midwives.

## Recommendation

### Change in Statute

#### 4.1 Change the title documented midwife to licensed midwife.

Under this recommendation, all references in the Midwifery Act to a documented midwife would be changed to a licensed midwife. References to documentation would also be changed to licensure.

## *Issue 5*

---

### Midwives Have Insufficient Representation on the Midwifery Board.

The Midwifery Board is currently composed of three documented midwives; one certified nurse-midwife; one obstetrician/gynecologist; one family practitioner or pediatrician; and three public members, one of whom must be the parent of a child born with the assistance of a midwife. Not having a majority of licensees on the Board is uncommon among Texas licensing boards, and because only one midwife member sits on each Board committee, midwifery representation is lost if the member is unable to attend committee meetings. In addition, the Midwifery Act contains an unclear restriction against more than one of the three midwives on the Board from being a licensed health care professional.

## Recommendations

### Change in Statute

#### 5.1 Increase the number of midwife positions on the Board from three to five.

This recommendation would eliminate the certified nurse-midwife and one public member from the Board, to be replaced with two midwife members. The new Board composition would include five midwives; one physician who is a certified obstetrician/gynecologist; one physician who is a certified family practitioner or pediatrician; and two public members, one of whom is a parent of a child born with the assistance of a midwife.

#### 5.2 Remove the prohibition against more than one midwifery Board member being a licensed health care professional.

This recommendation would delete an unclear provision from the Midwifery Act, as all documented midwives are licensed health care professionals.

## *Issue 6*

---

### **Texas Should Continue Regulating Dietitians, Marriage and Family Therapists, Midwives, Perfusionists, Professional Counselors, and Social Workers With Independent Boards or Advisory Committees at the Department of State Health Services.**

#### Key Findings

- Texas has a continuing interest in regulating the practice of dietitians, marriage and family therapists, midwives, perfusionists, licensed professional counselors, and social workers.
- The boards that regulate dietitians, marriage and family therapists, midwives, licensed professional counselors, and social workers protect the public by ensuring that only qualified practitioners may perform this work in Texas.

The regulation of health professions by the Texas Department of State Health Services is designed to ensure the qualifications of practitioners in the State's health care system. The Sunset Commission reviewed boards for six of these professions. Dietitians provide for medical dietary needs in institutional and other settings. Midwives provide an alternative to the medical model of childbirth. Perfusionists operate complex heart-lung machines in open-heart surgery. Licensed professional counselors, social workers, and marriage and family therapists provide a range of psychotherapy and counseling services in a variety of settings. Texans need to have confidence that these health-care practitioners are competent, meet established standards, and are held accountable for their actions.

## Recommendation

### Change in Statute

#### 6.1 Continue regulation of dietitians, marriage and family therapists, midwives, perfusionists, licensed professional counselors, and social workers at the Department of State Health Services.

Under this recommendation, the statutes that authorize the licensing of the six health-care professions would be continued for 12 years under the administrative umbrella provided by the Department of State Health Services. As detailed in Issue 1, the State Board of Examiners of Perfusionists, would be replaced with a Perfusionist Advisory Committee. The boards regulating dietitians, marriage and family therapists, midwives, licensed professional counselors, and social workers would continue as currently configured.

## Fiscal Implication Summary

Several recommendations on the six boards would have a fiscal impact to the State. The fiscal impact is summarized below.

- **Issue 1** – Funding travel expenses for five advisory committee members would cost about \$2,000 annually. Eliminating nine board member travel expenses would result in savings to the General Revenue Fund of \$3,600.
- **Issue 3** – Adjusting late renewal penalties would result in a loss to the General Revenue Fund of about \$25,600 annually beginning in 2008. Eliminating the payments to Midwifery Board members for attending their semi-annual meetings would save the State \$900 annually. Eliminating per diem payments to Dietitian Board members would result in \$800 in savings to the State.

<i>Fiscal Year</i>	<i>Cost to the General Revenue Fund</i>	<i>Savings to the General Revenue Fund</i>	<i>Net Effect on the General Revenue Fund</i>
2006	\$2,000	\$5,300	\$3,300
2007	\$2,000	\$5,300	\$3,300
2008	\$27,600	\$5,300	(\$22,300)
2009	\$27,600	\$5,300	(\$22,300)
2010	\$27,600	\$5,300	(\$22,300)

