

MaMHCA

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HB 1705 An Act Expanding Access and Safety of Mental Health Services

Lead Sponsor: Representative Josh Cutler

Legislative History:

LMHCs have been mandated providers since 1996 and were named as core providers in Massachusetts Mental Health Parity Laws in 2000. LMHC scope of practice is a full scope of practice in behavioral health since 2000, with the exception of medication prescription privileges and hospitalization privileges. Testimonial privilege was legislated in 2008.

What This Legislation Does:

This legislation allows for the protection of consumers of mental health services and the protection of Licensed Mental Health Counselors (LMHCs) wherein a consumer of mental health services is deemed to be in imminent danger of causing harm to themselves or others by the Licensed Mental Health Counselor to warrant assessment for hospitalization of the consumer for a period of 3 days. Under MGL Chapter 123 section 12, authorized professionals include physicians, psychologists, psychiatric nurse mental health clinical specialists, Licensed Independent Clinical Social Workers and police officers. This legislation would add LMHCs to the Massachusetts General Law by updating Chapter 123 Section 12 and 22 joining the above listed professionals with immunity from civil suits resulting in the authorization of a "Section 12".

Why is This Legislation Needed:

The legislation is needed to protect the safety of the consumer, the community and the LMHC working directly in a contracted therapeutic relationship with the consumer. LMHCs are master's level clinicians trained to assess, diagnose and treat when clients are a danger to themselves or others. Currently, LMHCs must have their assessment of a client in acute mental distress approved by a physician, psychologist, nurse or police officer in order for the patient to receive the emergency treatment they need, which can delay treatment in sometimes life threatening situations. Currently there are over 5,500 LMHCs working independently in private practice, mental health agencies, hospitals, day treatment centers and state departments with a full scope of practice working in all communities, seeing the same clientele as those professionals already listed under Chapter 123 Section 12. However, under the current law, LMHCs having the same abilities cannot utilize the same safety measures our sibling professionals can leaving consumers, individuals, practitioners, communities and the businesses they work for in jeopardy.

Cost:

There is no cost associated with this legislation.

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