We love to hear success stories about our members advocating on the state and federal levels. We enjoy these stories so much that we choose to share one of them each month, with you.

This month your Government Affairs team is shining the spotlight on Maggie Fitzsimmons, a graduate student in the Mental Health Counseling MS program at SUNY Oswego. She works in the Career Services department on campus as a graduate assistant, where she assists undergraduate students with determining their major and career exploration. She is also an intern at Heather L. Rice, LHMC, and PLLC Counseling Services. She is currently serving as the Legislative Advocacy Chair for ACA-NY. She is set to graduate in May of 2016 and plans to live and practice in central New York.

Maggie has recently been advocating on the federal level for the “Seniors Mental Health Access Improvement Act” (S.1830 and H.R.2759). She represented ACA-NY at the ACA’s Institute for Leadership Training in Washington, DC this summer. At this event she had the opportunity to meet in person with staffers for Senator Gillibrand, Senator Schumer, and Congressman Katko. Because of her hard work and others, Senators Gillibrand and Schumer have signed on as co-sponsors of the Senate version of the bill. She is also busy advocating on the state level. She is primarily focused on New York state’s scope of practice issue (which involves the lack of the word “diagnose” in New York state LMHC’s scope of practice). She has multiple upcoming meetings with her state representatives to discuss this issue. This is great work Maggie! We can’t wait to see what you do next.

If any members are interested in this type of advocacy work please contact Dillon Harp at dharp@counseling.org.
Art- Earlier this month, Congress passed the FY 2016 National Defense Authorization Act. The defense policy bill was approved by both chambers and includes an amendment sought by ACA that would allow more Licensed Professional Counselors (LPCs) to become independent practitioners under TRICARE. Under the current rule, after 2017, LPCs would only be able to become independent practitioners if they obtained their master’s degree from a program that was specifically a “clinical mental health counselling” program or “mental health counseling” program that is also accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). Achieving independent practitioner status would mean that TRICARE beneficiaries (members of our nation’s armed forces and their families) would be able to seek treatment from an LPC without first having to obtain a referral from a medical doctor.

This amendment would mean that until 2021, LPCs that obtained their degrees from a counseling program that was regionally accredited or CACREP accredited and was properly licensed, would be able to obtain independent practitioner status. This language comports with recommendations that ACA submitted to the Department of Defense in 2012 and would ensure that LPCs would not be segregated into two groups within the TRICARE system.

Most importantly of all, by making more qualified mental health professionals available to our service members we can improve the delivery of mental healthcare to a group of individuals that needs it and deserves it. And that is surely a policy that we can all get behind.

If you would like to contact Art, he can be reached at aterrazas@counseling.org.

October is National Bullying Prevention month, and ACA is partnering with several anti-bullying associations including The National Bullying Prevention Center, whose message is “The End of Bullying Begins with Me. October is the time for communities to unite nationwide and raise awareness of bullying prevention through events, outreach, and education. ACA is also very involved in the fight for school counselors, specifically the retention of and proper funding for the ESSCP (Elementary and Secondary School Counseling Program). This month the American Counseling Association has collaborated with coalition partners on several letters to Congress regarding ESEA (Elementary and Secondary Education Act) as well as ESSCP and we have also drafted our own letter requesting the retention of the ESSCP within the ESEA reauthorization. We will keep you informed as things progress in Congress.

If you would like to contact Guila, he can be reached at gtodd@counseling.org.

October has already been a busy month on the grassroots level. I am currently working with Kelly on advocating for a change in New York’s scope of practice for LMHCs to include the term “diagnose”. I am also planning on flying out to Colorado later this month where I will join fellow ACA members as talk to and give a tour of the Denver Mental Health Center to a few of Senator Bennett’s staffers. I have been working closely with members in Colorado to try and get Senator Bennett to be a cosponsor of our Medicare bill, S.1830.

If you would like to contact Dillon, he can be reached at dharp@counseling.org.

As of September, I have officially been with ACA for six months and in that time period, I am grateful that I have come to know so many of you! My plate is full of legislative and regulatory issues that span the country and even into the territories. In the past month, we have begun to make headway on a very serious issue in New York, the ability for LMHCs to diagnose. Some of you that live in places (I’m looking your way Georgia and Texas!) may also be familiar with this issue and if so, please know that it is on our radar. In the meantime, thank you to each of you in New York that responded to our request for documentation regarding the employment ramifications this scope of practice issue is having on your professional lives. However, while we received many responses narrating this occurrence, I would like to take this opportunity to emphasize that we need written documentation. If you have been denied employment because of the inability for LMHCs to diagnose in New York statute, please contact the potential employer and attempt to receive written proof of this denial. We are working on developing a strategy to push Senate Bill 1958 forward in the coming legislative session. This is a bill that will amend the scope of practice for LMHCs in New York to include the term “diagnose” and is sponsored by Sen. Robach. We are working closely with both ACA-NY and NYMHCA to coordinate these efforts and will call on our members in New York to reach out to their state legislators when the time comes. Please let me know how else ACA can help in your state and I look forward to continuing this important work!

If you would like to contact Kelly, she can be reached at knickel@counseling.org.