



Ask Me Anything with the Vermont Office of Professional Regulation

November 29, 2021

Lauren Hibbert, Director, Vermont Office of Professional Regulation

Lauren Layman, Staff Attorney, Vermont Office of Professional Regulation

Website Navigation

Layman and Hibbert opened the “AMA” by sharing the [OPR Website](#), with particular attention to efforts to reduce barriers to licensure, including:

[Fast Track Endorsement](#) resources, for the purposes of licensing out-of-state professionals who have been licensed in good standing in that profession in another state, and in active practice in that profession for a minimum of three years immediately preceding the professional’s application for licensure in Vermont. More information about fast track endorsement can be found here:

<https://sos.vermont.gov/opr/regulatory/reducing-barriers/fast-track-endorsement>.

Q: Does the professional have to have worked full time for three years? A: Yes, although certain exemptions, such as for ADA accommodations, can be made. Full time is defined in OPR policy as 30 hours per week.

Q: Are Alcohol and Drug Counselors eligible for fast track endorsement? A: No. Fast track endorsement is available for individuals licensed in the same profession (i.e., with the same scope of practice) in another state. Because other states do not currently have a consistently defined scope of practice for LADCs, this profession is not eligible for fast track endorsement applications. Some of the allied mental health professions (LCMHCs and LMFTs) are accepting fast-track endorsements. Rostered non-licensed and noncertified psychotherapists are not eligible for the fast track endorsement process because (a) the roster is a registration, which requires only the submission of information to OPR, and (b) as with LADCs, there is no comparable profession (i.e., same scope of practice) in other states. It is important to note that individuals licensed in another state in a profession with a scope of practice that is different from the scope for the profession in Vermont are not eligible for fast track endorsement. For example, licensed professional counselors in some states may assess and treat clients but may

not diagnose clients' illnesses, which is distinct from the scope of practice of an LCMCH in Vermont that includes diagnosis, assessment and treatment. In turn, LPCs from these states that do not permit LPCs to diagnose are not eligible for a fast track endorsement for a LCMHC license.

[Reducing Barriers to Licensure for Refugees and New Americans](https://sos.vermont.gov/opr/regulatory/reducing-barriers/new-americans) – OPR noted that there are new rules that permit individuals who have obtained a professional qualification (e.g., education, work experience) outside of the United States to potentially use those qualifications toward licensure in Vermont. Under the rules, individuals with qualifications from a different country would submit those qualifications to a third-party, credentialing evaluation service that is a member of NACES or AICE, Inc. The service will then assess whether the qualification obtained in another country is equivalent to the qualification required for licensure in Vermont. More information about the new rules can be found here: <https://sos.vermont.gov/opr/regulatory/reducing-barriers/new-americans>.

[Reducing Barriers for Individuals with Criminal Records](https://sos.vermont.gov/opr/regulatory/reducing-barriers/criminal-backgrounds): For \$25, potential licensees can get a predetermination that a past criminal conviction will not preclude them from obtaining a specific license. This policy encourages people, who are concerned they will not be eligible for a license due to a past criminal conviction, to undertake education and other professional qualifications by providing some reassurance to the applicant. More information about the Second Chance Predetermination Program can be found here: <https://sos.vermont.gov/opr/regulatory/reducing-barriers/criminal-backgrounds>.

OPR then provided navigation of the [Allied Mental Health webpage](#), including rules, archived minutes, and membership of each board.

- OPR is seeking people who are interested in being a public member of the Board of Allied Mental Health Practitioners and/or many other professional boards. More information about becoming a board member can be found here: <https://sos.vermont.gov/opr/about-opr/become-a-board-member-or-advisor>. Please note that a potential *public* board member candidate for the Board of Allied Mental Health Practitioners cannot have or have a close family member (i.e., spouse, parent, child, brother or sister) who has a financial interest in clinical mental health counseling, marriage and family therapy, or psychotherapy.
- The best way to attend board meetings is to go to the [calendar](#) page and find the monthly meeting. These meetings are open to the public and all are encouraged to attend!
- The [Forms and Instructions](#) page shows sample public disclosure forms and a course worksheet. OPR recommends that potential Allied Mental Health licensees use this [worksheet](#) to understand what course will satisfy requirements for specific licenses. The [Administrative Rules of the Board of Allied Mental Health Practitioners](#) establishes all the course requirements and can be referred to when filling out the worksheet. They noted that a course can only count once, and it has to be a standalone course in the required subject matter. For example, if an applicant has taken a course that has three classes out of 12 on counseling skills, then it's not considered a standalone course in counseling skills. This is a very helpful place to get started to work through getting licensed.

Q&A – edited for clarity

Q: I've communicated with OPR and it looks like the only option is for me to get another Master's Degree. I've been working full time as a mental health counselor in Vermont and can't afford to have time to do this.

A: There are several pathways to licensure: fast track endorsement; substantial-equivalence endorsement from another state; examination from a CACREP-accredited clinical mental health program; and examination from a non-CACREP-accredited clinical mental health program. If you are licensed in another state, please explore fast-track and substantial-equivalence endorsement. If you are not licensed in another state, you need to apply by examination, which requires approval of education prior to be approved for the examination. The Rules create two pathways for education:

- A degree from a CACREP accredited institution
- A degree with specific coursework. Components that MUST to be within the program and cannot be supplemented afterward include:
 - three credits in diagnosis, assessment, and treatment (as defined in Rule 3.8(b))
 - at least 600 hours internship
 - There is a list of seven courses (see Rule 3.8(d)); you need to have taken five of those seven courses.

There are additional course requirements, as well, but, if the program doesn't include these other course requirements, the applicant can supplement them after receiving the degree. If you don't have the components listed above, however, there is not much our board can do.

Clinicians need to have 60 credits in the underlying degree program to become a licensed mental health counselor and at least 45 credit hours in the underlying degree program for a licensed alcohol and drug counselor. An LADC needs 60 credit hours to get licensed but can supplement 15 credit hours post degree.

Q: Can I stay rostered indefinitely?

A: Yes, absolutely. The barrier we have heard is billing.¹ For telehealth, it is OPR's understanding that billing for services rendered when you are on the roster is possible if you are licensed in another state and in good standing.

Q: When applying for CEUS, could there be a way to apply for continuing education credits in multiple disciplines at the same time?

A: We know it's a problem. It's a system issue, but it's on OPR's roadmap for work. We don't know the timing, but it's our intention to fix it.

Q: For designated agency nurses, applications for CEUs are denied for the same courses that are approved for other disciplines.

¹ Dillon Burns from VCP noted that the Department of Vermont Health Access (DVHA) requires master's level clinicians engaging in post-degree practice to become licensed after no more than five years on the roster in order receive payments from Vermont Medicaid for their services.

A: Nurses don't have to complete continuing education for licensure, they just need to be in active practice.

Q: I'm doing a second license because I was under the impression that I'm not allowed to provide mental health services as an LADC. This doesn't make sense to me since I have a counseling degree, it is within my scope of practice, and I'm an EMDR therapist and a consultant. I'm a clinical director but providing direct service as a result of the high demand. I'm only doing this extra step to accommodate OPR.

A: If you have an LADC you are allowed to treat MH conditions that are related to drug and alcohol use. You are not allowed to do so broadly, unless you are on the roster. The roster is a broad base to do all mental health treatment. The LADC is a specialized mental health credential that only allows you to treat addiction. If you have to treat the broad base, you have to get on the roster. You can be on the roster and have an LADC, which would allow you to treat the whole spectrum of treatment. Or you could pursue the LCMHC.

Insurers and payers often use licensing so they don't have to assess credentials themselves. That's part of the reason that OPR is reluctant to move away from standards. It is a signal that people have acquired these credentials.

Q: OPR's online application system is not allowing me to apply for the second exam (i.e. for mental health counseling license).

A: If there is a snafu on our end, we can clear that up.

Q: I was trained and have a PhD from California where the LADC is not a separate credential. My coursework didn't address SUD specifically but rather co-occurring care. The work that I have been doing for several years is SUD work. Is there an exam so that I can I test out?

A: LADC is more liberal in its requirements for licensure. To be eligible, the [statute](#) says you must:

have received a master's degree or doctorate in a human services field from an accredited educational institution, including a degree in counseling, social work, psychology, or an allied mental health field, or a master's degree or higher in a health care profession regulated under this title or Title 33, after having successfully completed a course of study with course work including theories of human development, diagnostic and counseling techniques, professional ethics, and a supervised clinical practicum;

OPR does not have the authority to waive this. If you have these things, you can apply to sit for the exam. Do you have to complete additional supervision? Probably yes, unless your other supervision was within the last five years and was relevant to meets the requirements for LADC supervision.

Follow up Q: In our network, we struggle to find LADCs. Many would fit into this same profile [as questioner]. Some of our agencies' specific programming requires a LADC. We have staff who have the clinical expertise, but their supervision hours were more than five years ago. Do you they have start with supervised practice over again?

A: According to the Administrative Rules, there is not currently a mechanism [to accept supervision hours in other fields toward LADC licensure or to waive the required supervision]. You need to complete supervised practice. If someone has completed relevant supervision for another license (e.g., supervised practice in a MAT program for LICSW licensure) that meets the requirements of the Rules (see Rule

5.4(b)), they may be able to use that supervised practice toward the LADC license, too. Documentation is still required. The supervisor is not limited to a clinician with an LADC credential. Supervisors would have to be:

- An LADC with at least one year of full-time professional experience, licensed and in good standing as an LADC, OR
- Independent clinical social worker, psychologist, marriage and family therapist, or clinical mental health counselor licensed in good standing in Vermont who have completed addiction counseling training in accordance with the Rules, and accrued at least one year of full time addiction counseling experience or its part-time equivalent, OR
- Allopathic or osteopathic surgeon certified in addiction medicine

There is currently no exemption if potential licensee themselves meets the qualifications be a supervisor, then maybe you should not have to do the training. While OPR is limited to the current rules, there is the potential in the future to modify rules and statutes.

Q: I'm a psychologist. Many of the courses I attend are approved for LICSWs or LCMHCs, but not approved for psychologists because there are fewer of us or they haven't thought of it. Is there a streamlining if it's already been approved for LICSW, can it be approved for psychologists? I'd like to get CEU credit for those.

A: You can always apply to get courses approved for continuing education credit and the Board will review the request. The Board of Psychological Examiners often approves courses that are also approved for other mental health professions. OPR will work to streamline this process for courses being used for multiple professions. We need to hear from you as an important constituency when we open the rules. The psychology, allied mental health, and social work rules could say that CE approved in these other areas could be approved for all mental health professions, but they don't allow that automatically now. The boards may not agree, but the only way we hear about it from this very important constituency is if you let us know.

The standards for accepting CEs are vague. For psychology it's related to the practice of psychology. OPR could consider a way to allow someone to apply for credit in all three professions at once. Of note: there will be a review period for continuing education in the next five years for all professions. Psychology has been eager to go first, because they have the highest level of CEs of any profession -- 60 hours every two years. That could be an opportunity to voice your opinion that you would like CEs in other MH fields to be counted, either automatically or within certain parameters. Right now there is not an automatic mechanism.

Q: We had an employee who resigned and moved to Maine. Can he perform telehealth services for us from Maine while unlicensed but rostered in Vermont?

A: The clinician who moved to Maine can continue to be licensed as such – there is no residency requirement for licensure. Telehealth will most likely be recommended by OPR to be extended. We have a set of recommendations to the legislature which would allow the continuation of telehealth through various measures, including waiver, registration, and telehealth licensure.

There have been questions about allowing for remote supervision. We currently have a policy that accepts this practice through July 2023. The boards are going to be looking to develop a more holistic policy in the next 18 months. For now, the Boards are accepting pre-degree internship or externships that are remote towards licensure and post-degree remote supervision.

Q: Can I stay rostered for the foreseeable future? I've been rostered since 2008.

A: For OPR, there is no deadline in the license. You can remain a psychotherapist and provide psychotherapy. For payment from DVHA, you have five years. For payment, talk to DVHA and private payers.

Q: I'm a licensed clinical social worker who holds a license in Florida. I've been able to participate [in continuing education] but Florida won't accept the Vermont CEs. Is there a quick and easy way to check which classes count?

A: Anything that is pre-approved by NASW, ASWB, and CSWB is approved here in Vermont. Consider going to a national organization such as ASWB and see if there is something that is licensed in both states. OPR is working with other states to develop a national compact for social workers. To be accepted in Vermont, continuing education needs to have a substantive link to social work practice: social health and research, policy development, education and supervision, clinical theory and techniques, human growth and development, medicine, law, education, and sciences relevant to the practice of clinical social work.

For continuing education, you submit your documentation in your renewal application. We audit 10% of renewal applications. If you get caught up in the audit net, the office reviews your continuing education to make sure its in compliance with the professional rules. If something is out of compliance, you can then create a 90-day fix plan (to take the correct course or additional hours). We suggest that people do not spend \$25 for pre-approval unless you are going to spend a lot of money or time on a course (i.e. to travel for a course, do all your CE in one course) because the biggest consequence for it not being accepted is to have to do another one.