



Board of Behavioral Sciences

Memo

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To: Committee Members
From: Rosanne Helms
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Date: October 7, 2021
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Subject: Proposed Legislation: Omnibus Bill 2022

Each year, staff reviews the Board's statutes to if determine technical, minor or nonsubstantive clean-up amendments need to be made. Typically, such amendments are run in an omnibus bill that the legislature runs each year.

Staff has identified three sets of amendments that the Board may wish to consider for inclusion in the upcoming year's omnibus bill.

1. Amend BPC Sections 4980.396, 4989.23, 4996.27, 4999.66: Required Suicide Risk Assessment Coursework or Experience - Correct Numbering Error (Attachment A)

Background: The one-time requirement that all applicants for licensure and current licensees complete 6 hours of coursework or experience in suicide risk assessment and intervention became effective on January 1, 2021.

There is an error with subdivision (c) in each of the above listed code sections. Subdivision (c) should actually be a part of subdivision (b). This is because the requirement that compliance be certified under penalty of perjury only applies to existing licensees. Applicants must submit written documentation to the board instead of self-certifying; therefore the language in subdivision (c) does not apply to applicants, only licensees.

Recommendation: Make the language in subdivision (c) a part of subdivision (b), so that it is clear that the self-certifying under penalty of perjury requirement is only applicable to existing licensees.

2. Amend BPC Sections 4980.03, 4996.20, and 4999.12 - Reference Error regarding Requirements for Licensed Educational Psychologists (LEPs) who Serve as Supervisors (Attachment B)

Background: One requirement for LEPs who serve as supervisors of associates is that they must have practiced psychological counseling, or served as a supervisor, for at least 2 of the past 5 years immediately preceding supervision.

The requirement citing the practice psychological counseling requirement is incorrect in the three above listed sections. Sections 4980.03 and 4999.12 incorrectly reference sections 4989.14(b) of LEP statute, which is not the correct reference. Section 4996.20 incorrectly references section 4989.14(e), which does not exist. The correct reference is section 4989.14(a)(5), which includes psychological counseling as part of the LEP scope of practice.

Recommendation: Correct the errant reference in sections 4980.03, 4996.20, and 4999.12 to correctly reference section 4989.14(a)(5).

3. Amend Health and Safety Code Section 1374.72 and Insurance Code Section 10144.5 – Definition of a “Health Care Provider” in SB 855 (Chapter 151, Statutes of 2020) (Attachment C)

Identification of the Problem: SB 855 (Wiener, Health Coverage: Mental Health or Substance Use Disorders) was a bill the Board supported that the Governor signed into law in 2020.

The bill expands California’s 1999 Mental Health Parity Act. It requires health plans and insurers that provide hospital, medical or surgical coverage to cover all medically necessary treatment of mental health and substance use disorders under the same terms and conditions applied to other medical conditions.

This bill contains a definition of a “health care provider” in the two sections noted above. Separate from its position, the Board had ultimately decided to request that all of its associates be added to the definition of “health care provider”, but that trainees either be removed, or it be clarified that they are under supervision of a licensed person.

Due to the unusual circumstances of the 2020 legislative session, the author was ultimately not able to make these amendments before session ended. The author’s staff person suggested, however, that the Board pursue them as part of the Health Committee’s omnibus bill.

Proposed Solution: The Board requests an amendment to the definition of a “health care provider” as follows to address its concerns:

- Delete professional clinical counselor trainees from the definition (they cannot count pre-degree hours, and therefore are not necessarily under the supervision of a licensed professional.)

- Continue to include marriage and family therapist trainees in the definition but clarify that they are performing activities and services as part of their supervised course of study as set out in §4980.42 of the Business and Professions Code. (In order to count pre-degree hours, MFT trainees must be supervised by a licensed person who meets the Board’s supervisor qualifications.)

Recommendation

Conduct an open discussion about the proposed amendments. Direct staff to make any discussed changes, and any non-substantive changes, and bring to the Board for consideration as a legislative proposal.

Attachments

Attachment A: Proposed Language to Amend BPC Sections 4980.396, 4989.23, 4996.27, 4999.66: Required Suicide Risk Assessment Coursework or Experience - Correct Numbering Error

Attachment B: Proposed Language to Amend BPC Sections 4980.03, 4996.20, and 4999.12 - Reference Error Regarding Requirements for LEPs who Serve as Supervisors

Attachment C: Amend Health and Safety Code Section 1374.72 and Insurance Code Section 10144.5 – Definition of a “Health Care Provider”

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**Attachment A
Omnibus Bill 2022
Proposed Text**

AMEND BUSINESS AND PROFESSIONS CODE (BPC)§ 4980.396. REQUIRED COURSEWORK OR SUPERVISED EXPERIENCE: SUICIDE RISK ASSESSMENT AND INTERVENTION

- (a) On or after January 1, 2021, an applicant for licensure as a marriage and family therapist shall show, as part of the application, that he or she has completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention. This requirement shall be met in one of the following ways:
- (1) Obtained as part of his or her qualifying graduate degree program. To satisfy this requirement, the applicant shall submit to the board a written certification from the registrar or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's curriculum required for graduation at the time the applicant graduated, or within the coursework that was completed by the applicant.
 - (2) Obtained as part of his or her applied experience. Applied experience can be met in any of the following settings: practicum or associateship that meets the requirement of this chapter, formal postdoctoral placement that meets the requirements of Section 2911, or other qualifying supervised experience. To satisfy this requirement, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience has occurred stating that the training required by this section is included within the applied experience.
 - (3) By taking a continuing education course that meets the requirements of Section 4980.54. To satisfy this requirement, the applicant shall submit to the board a certification of completion.
- (b) As a one-time requirement, a licensee prior to the time of his or her first renewal after January 1, 2021, or an applicant for reactivation or reinstatement to an active license status on or after January 1, 2021, shall have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention, using one of the methods specified in subdivision (a).
- (c) Proof of compliance with this section shall be certified under penalty of perjury that he or she is in compliance with this section and shall be retained for submission to the board upon request.

AMEND BPC § 4989.23. REQUIRED COURSEWORK OR SUPERVISED EXPERIENCE: SUICIDE RISK ASSESSMENT AND INTERVENTION

- (a) On or after January 1, 2021, an applicant for licensure as an educational psychologist shall show, as part of the application, that he or she has completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention. This requirement shall be met in one of the following ways:
- (1) Obtained as part of his or her qualifying graduate degree program. To satisfy this requirement, the applicant shall submit to the board a written certification from the registrar or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's curriculum required for graduation at the time the applicant graduated, or within the coursework that was completed by the applicant.
 - (2) Obtained as part of his or her applied experience. Applied experience can be met in any of the following settings: practicum, supervised experience gained pursuant to Section 4989.20, formal postdoctoral placement that meets the requirements of Section 2911, or other qualifying supervised experience. To satisfy this requirement, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience has occurred stating that the training required by this section is included within the applied experience.
 - (3) By taking a continuing education course that meets the requirements of Section 4989.34. To satisfy this requirement, the applicant shall submit to the board a certification of completion.
- (b) As a one-time requirement, a licensee prior to the time of his or her first renewal after January 1, 2021, or an applicant for reactivation or reinstatement to an active license status on or after January 1, 2021, shall have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention, using one of the methods specified in subdivision (a).
- (c) Proof of compliance with this section shall be certified under penalty of perjury that he or she is in compliance with this section and shall be retained for submission to the board upon request.

AMEND BPC § 4996.27. REQUIRED COURSEWORK OR SUPERVISED EXPERIENCE: SUICIDE RISK ASSESSMENT AND INTERVENTION

- (a) On or after January 1, 2021, an applicant for licensure as a clinical social worker shall show, as part of the application, that he or she has completed a minimum of six hours of coursework or applied experience under supervision in suicide risk

assessment and intervention. This requirement shall be met in one of the following ways:

- (1) Obtained as part of his or her qualifying graduate degree program. To satisfy this requirement, the applicant shall submit to the board a written certification from the registrar or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's curriculum required for graduation at the time the applicant graduated, or within the coursework that was completed by the applicant.
 - (2) Obtained as part of his or her applied experience. Applied experience can be met in any of the following settings: practicum or associateship that meets the requirement of this chapter, formal postdoctoral placement that meets the requirements of Section 2911, or other qualifying supervised experience. To satisfy this requirement, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience has occurred stating that the training required by this section is included within the applied experience.
 - (3) By taking a continuing education course that meets the requirements of Section 4996.22. To satisfy this requirement, the applicant shall submit to the board a certification of completion.
- (b) As a one-time requirement, a licensee prior to the time of his or her first renewal after January 1, 2021, or an applicant for reactivation or reinstatement to an active license status on or after January 1, 2021, shall have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention, using one of the methods specified in subdivision (a).
- (c) Proof of compliance with this section shall be certified under penalty of perjury that he or she is in compliance with this section and shall be retained for submission to the board upon request.

AMEND BPC § 4999.66. REQUIRED COURSEWORK OR SUPERVISED EXPERIENCE: SUICIDE RISK ASSESSMENT AND INTERVENTION

- (a) On or after January 1, 2021, an applicant for licensure as a professional clinical counselor shall show, as part of the application, that he or she has completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention. This requirement shall be met in one of the following ways:
- (1) Obtained as part of his or her qualifying graduate degree program. To satisfy this requirement, the applicant shall submit to the board a written certification from the registrar or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's curriculum required for graduation at the

time the applicant graduated, or within the coursework that was completed by the applicant.

- (2) Obtained as part of his or her applied experience. Applied experience can be met in any of the following settings: practicum or associateship that meets the requirement of this chapter, formal postdoctoral placement that meets the requirements of Section 2911, or other qualifying supervised experience. To satisfy this requirement, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience has occurred stating that the training required by this section is included within the applied experience.
 - (3) By taking a continuing education course that meets the requirements of Section 4999.76. To satisfy this requirement, the applicant shall submit to the board a certification of completion.
- (b) As a one-time requirement, a licensee prior to the time of his or her first renewal after January 1, 2021, or an applicant for reactivation or reinstatement to an active license status on or after January 1, 2021, shall have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention, using one of the methods specified in subdivision (a).
- (c) Proof of compliance with this section shall be certified under penalty of perjury that he or she is in compliance with this section and shall be retained for submission to the board upon request.

**Attachment B
Omnibus Bill 2022
Proposed Text**

(Note: The language shown here assumes that AB 462 is signed into law by the Governor.)

AMEND BUSINESS AND PROFESSIONS CODE (BPC) §4980.03. DEFINITIONS

- (a) “Board,” as used in this chapter, means the Board of Behavioral Sciences.
- (b) “Associate,” as used in this chapter, means an unlicensed person who has earned a master’s or doctoral degree qualifying the person for licensure and is registered with the board as an associate.
- (c) “Trainee,” as used in this chapter, means an unlicensed person who is currently enrolled in a master’s or doctoral degree program, as specified in Sections 4980.36 and 4980.37, that is designed to qualify the person for licensure under this chapter, and who has completed no less than 12 semester units or 18 quarter units of coursework in any qualifying degree program.
- (d) “Applicant for licensure,” as used in this chapter, means an unlicensed person who has completed the required education and required hours of supervised experience for licensure.
- (e) “Advertise,” as used in this chapter, includes, but is not limited to, any public communication, as defined in subdivision (a) of Section 651, the issuance of any card, sign, or device to any person, or the causing, permitting, or allowing of any sign or marking on, or in, any building or structure, or in any newspaper or magazine or in any directory, or any printed matter whatsoever, with or without any limiting qualification. Signs within religious buildings or notices in church bulletins mailed to a congregation shall not be construed as advertising within the meaning of this chapter.
- (f) “Experience,” as used in this chapter, means experience in interpersonal relationships, psychotherapy, marriage and family therapy, direct clinical counseling, and nonclinical practice that satisfies the requirements for licensure as a marriage and family therapist.
- (g) “Supervisor,” as used in this chapter, means an individual who meets all of the following requirements:
 - (1) Has held an active license for at least two years within the five-year period immediately preceding any supervision as any of the following:
 - (A) A licensed professional clinical counselor, licensed marriage and family therapist, psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900),

licensed clinical social worker, licensed educational psychologist, or equivalent out-of-state license. A licensed educational psychologist may only supervise the provision of educationally related mental health services that are consistent with the scope of practice of an educational psychologist, as specified in Section 4989.14.

(B) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology or an out-of-state licensed physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.

(2) For at least two years within the five-year period immediately preceding any supervision, has practiced psychotherapy, provided psychological counseling pursuant to [subdivision \(b\) paragraph 5 of subdivision \(a\)](#) of Section 4989.14, or provided direct clinical supervision of psychotherapy performed by marriage and family therapist trainees, associate marriage and family therapists, associate professional clinical counselors, or associate clinical social workers. Supervision of psychotherapy performed by a social work intern or a professional clinical counselor trainee shall be accepted if the supervision provided is substantially equivalent to the supervision required for registrants.

(3) Has received training in supervision as specified in this chapter and by regulation.

(4) Has not provided therapeutic services to the supervisee.

(5) Has and maintains a current and active license that is not under suspension or probation as one of the following:

(A) A marriage and family therapist, professional clinical counselor, clinical social worker, or licensed educational psychologist, issued by the board.

(B) A psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900).

(C) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.

(6) Is not a spouse, domestic partner, or relative of the supervisee.

(7) Does not currently have or previously had a personal, professional, or business relationship with the supervisee that undermines the authority or effectiveness of the supervision.

(h) "Client centered advocacy," as used in this chapter, includes, but is not limited to, researching, identifying, and accessing resources, or other activities, related to obtaining or providing services and supports for clients or groups of clients receiving psychotherapy or counseling services.

(i) "Accredited," as used in this chapter, means a school, college, or university accredited by either the Commission on Accreditation for Marriage and Family Therapy

Education or a regional or national institutional accrediting agency that is recognized by the United States Department of Education.

(j) "Approved," as used in this chapter, means a school, college, or university that possessed unconditional approval by the Bureau for Private Postsecondary Education at the time of the applicant's graduation from the school, college, or university.

AMEND BPC §4996.20. ASSOCIATE CLINICAL SOCIAL WORKER: ACCEPTABLE SUPERVISORS AND SUPERVISION DEFINITION

(a) "Supervisor," as used in this chapter, means an individual who meets all of the following requirements:

(1) Has held an active license for at least two years within the five-year period immediately preceding any supervision as either:

(A) A licensed professional clinical counselor, licensed marriage and family therapist, psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900), licensed clinical social worker, licensed educational psychologist, or equivalent out-of-state license. A licensed educational psychologist may only supervise the provision of educationally related mental health services that are consistent with the scope of practice of an educational psychologist, as specified in Section 4989.14.

(B) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology or an out-of-state licensed physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.

(2) For at least two years within the five-year period immediately preceding any supervision, has practiced psychotherapy, provided psychological counseling pursuant to [subdivision \(e\) paragraph 5 of subdivision \(a\)](#) of Section 4989.14, or provided direct clinical supervision of psychotherapy performed by associate clinical social workers, associate marriage and family therapists or trainees, or associate professional clinical counselors. Supervision of psychotherapy performed by a social work intern or a professional clinical counselor trainee shall be accepted if the supervision provided is substantially equivalent to the supervision required for registrants.

(3) Has received training in supervision as specified in this chapter and by regulation.

(4) Has not provided therapeutic services to the supervisee.

(5) Has and maintains a current and active license that is not under suspension or probation as one of the following:

(A) A marriage and family therapist, professional clinical counselor, clinical social worker, or licensed educational psychologist issued by the board.

(B) A psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900).

(C) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.

(6) Is not a spouse, domestic partner, or relative of the supervisee.

(7) Does not currently have or previously had a personal, professional, or business relationship with the supervisee that undermines the authority or effectiveness of the supervision.

(b) As used in this chapter, the term “supervision” means responsibility for, and control of, the quality of mental health and related services provided by the supervisee. Consultation or peer discussion shall not be considered supervision and shall not qualify as supervised experience.

“Supervision” includes, but is not limited to, all of the following:

(1) Ensuring the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the supervisee.

(2) Monitoring and evaluating the supervisee’s assessment, diagnosis, and treatment decisions and providing regular feedback.

(3) Monitoring and evaluating the supervisee’s ability to provide services at the site or sites where the supervisee is practicing and to the particular clientele being served.

(4) Monitoring and addressing clinical dynamics, including, but not limited to, countertransference-, intrapsychic-, interpersonal-, or trauma-related issues that may affect the supervisory or the practitioner-patient relationship.

(5) Ensuring the supervisee’s compliance with laws and regulations governing the practice of clinical social work.

(6) Reviewing the supervisee’s progress notes, process notes, and other patient treatment records, as deemed appropriate by the supervisor.

(7) With the client’s written consent, providing direct observation or review of audio or video recordings of the supervisee’s counseling or therapy, as deemed appropriate by the supervisor.

AMEND BPC §4999.12. DEFINITIONS

For purposes of this chapter, the following terms have the following meanings:

(a) “Board” means the Board of Behavioral Sciences.

(b) “Accredited” means a school, college, or university accredited by a regional or national institutional accrediting agency that is recognized by the United States Department of Education.

(c) “Approved” means a school, college, or university that possessed unconditional approval by the Bureau for Private Postsecondary Education at the time of the applicant’s graduation from the school, college, or university.

(d) “Applicant for licensure” means an unlicensed person who has completed the required education and required hours of supervised experience for licensure.

(e) “Licensed professional clinical counselor” or “LPCC” means a person licensed under this chapter to practice professional clinical counseling, as defined in Section 4999.20.

(f) “Associate” means an unlicensed person who meets the requirements of Section 4999.42 and is registered with the board.

(g) “Clinical counselor trainee” means an unlicensed person who is currently enrolled in a master’s or doctoral degree program, as specified in Section 4999.32 or 4999.33, that is designed to qualify the person for licensure and who has completed no less than 12 semester units or 18 quarter units of coursework in any qualifying degree program.

(h) “Supervisor” means an individual who meets all of the following requirements:

(1) Has held an active license for at least two years within the five-year period immediately preceding any supervision as either:

(A) A licensed professional clinical counselor, licensed marriage and family therapist, psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900), licensed clinical social worker, licensed educational psychologist, or equivalent out-of-state license. A licensed educational psychologist may only supervise the provision of educationally related mental health services that are consistent with the scope of practice of an educational psychologist, as specified in Section 4989.14.

(B) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology, or an out-of-state licensed physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.

(2) For at least two years within the five-year period immediately preceding any supervision, has practiced psychotherapy, provided psychological counseling pursuant to [subdivision \(b\) paragraph 5 of subdivision \(a\)](#) of Section 4989.14, or provided direct clinical supervision of psychotherapy performed by marriage and family therapist trainees, associate marriage and family therapists, associate professional clinical counselors, or associate clinical social workers. Supervision of psychotherapy performed by a social work intern or a professional clinical counselor trainee shall be accepted if the supervision provided is substantially equivalent to the supervision required for registrants.

- (3) Has received training in supervision as specified in this chapter and by regulation.
- (4) Has not provided therapeutic services to the supervisee.
- (5) Has and maintains a current and active license that is not under suspension or probation as one of the following:
- (A) A marriage and family therapist, professional clinical counselor, clinical social worker, or licensed educational psychologist issued by the board.
- (B) A psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900).
- (C) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.
- (6) Is not a spouse, domestic partner, or relative of the supervisee.
- (7) Does not currently have or previously had a personal, professional, or business relationship with the supervisee that undermines the authority or effectiveness of the supervision.
- (i) “Client centered advocacy” includes, but is not limited to, researching, identifying, and accessing resources, or other activities, related to obtaining or providing services and supports for clients or groups of clients receiving psychotherapy or counseling services.
- (j) “Advertising” or “advertise” includes, but is not limited to, the issuance of any card, sign, or device to any person, or the causing, permitting, or allowing of any sign or marking on, or in, any building or structure, or in any newspaper or magazine or in any directory, or any printed matter whatsoever, with or without any limiting qualification. It also includes business solicitations communicated by radio or television broadcasting. Signs within church buildings or notices in church bulletins mailed to a congregation shall not be construed as advertising within the meaning of this chapter.
- (k) “Referral” means evaluating and identifying the needs of a client to determine whether it is advisable to refer the client to other specialists, informing the client of that judgment, and communicating that determination as requested or deemed appropriate to referral sources.
- (l) “Research” means a systematic effort to collect, analyze, and interpret quantitative and qualitative data that describes how social characteristics, behavior, emotion, cognitions, disabilities, mental disorders, and interpersonal transactions among individuals and organizations interact.
- (m) “Supervision” means responsibility for, and control of, the quality of mental health and related services provided by the supervisee. Consultation or peer discussion shall not be considered supervision and shall not qualify as supervised experience. Supervision includes, but is not limited to, all of the following:

(1) Ensuring the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the supervisee.

(2) Monitoring and evaluating the supervisee's assessment, diagnosis, and treatment decisions and providing regular feedback.

(3) Monitoring and evaluating the supervisee's ability to provide services at the site or sites where the supervisee is practicing and to the particular clientele being served.

(4) Monitoring and addressing clinical dynamics, including, but not limited to, countertransference-, intrapsychic-, interpersonal-, or trauma-related issues that may affect the supervisory or the practitioner-patient relationship.

(5) Ensuring the supervisee's compliance with laws and regulations governing the practice of licensed professional clinical counseling.

(6) Reviewing the supervisee's progress notes, process notes, and other patient treatment records, as deemed appropriate by the supervisor.

(7) With the client's written consent, providing direct observation or review of audio or video recordings of the supervisee's counseling or therapy, as deemed appropriate by the supervisor.

(n) "Clinical setting" means any setting that meets both of the following requirements:

(1) Lawfully and regularly provides mental health counseling or psychotherapy.

(2) Provides oversight to ensure that the associate's work meets the experience and supervision requirements set forth in this chapter and in regulation and is within the scope of practice of the profession.

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**Attachment C
Omnibus Bill 2022
Proposed Text**

AMEND HEALTH AND SAFETY CODE §1374.72.

(a) (1) Every health care service plan contract issued, amended, or renewed on or after January 1, 2021, that provides hospital, medical, or surgical coverage shall provide coverage for medically necessary treatment of mental health and substance use disorders, under the same terms and conditions applied to other medical conditions as specified in subdivision (c).

(2) For purposes of this section, “mental health and substance use disorders” means a mental health condition or substance use disorder that falls under any of the diagnostic categories listed in the mental and behavioral disorders chapter of the most recent edition of the International Classification of Diseases or that is listed in the most recent version of the Diagnostic and Statistical Manual of Mental Disorders. Changes in terminology, organization, or classification of mental health and substance use disorders in future versions of the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders or the World Health Organization’s International Statistical Classification of Diseases and Related Health Problems shall not affect the conditions covered by this section as long as a condition is commonly understood to be a mental health or substance use disorder by health care providers practicing in relevant clinical specialties.

(3) (A) For purposes of this section, “medically necessary treatment of a mental health or substance use disorder” means a service or product addressing the specific needs of that patient, for the purpose of preventing, diagnosing, or treating an illness, injury, condition, or its symptoms, including minimizing the progression of that illness, injury, condition, or its symptoms, in a manner that is all of the following:

(i) In accordance with the generally accepted standards of mental health and substance use disorder care.

(ii) Clinically appropriate in terms of type, frequency, extent, site, and duration.

(iii) Not primarily for the economic benefit of the health care service plan and subscribers or for the convenience of the patient, treating physician, or other health care provider.

(B) This paragraph does not limit in any way the independent medical review rights of an enrollee or subscriber under this chapter.

(4) For purposes of this section, “health care provider” means any of the following:

(A) A person who is licensed under Division 2 (commencing with Section 500) of the Business and Professions Code.

(B) An associate marriage and family therapist ~~or marriage and family therapist trainee~~ functioning pursuant to Section 4980.43.3 of the Business and Professions Code.

(C) A qualified autism service provider or qualified autism service professional certified by a national entity pursuant to Section 10144.51 of the Insurance Code and Section 1374.73.

(D) An associate clinical social worker functioning pursuant to Section 4996.23.2 of the Business and Professions Code.

(E) An associate professional clinical counselor ~~or professional clinical counselor trainee~~ functioning pursuant to Section 4999.46.3 of the Business and Professions Code.

(F) A registered psychologist, as described in Section 2909.5 of the Business and Professions Code.

(G) A registered psychological assistant, as described in Section 2913 of the Business and Professions Code.

(H) A psychology trainee or person supervised as set forth in Section 2910 or 2911 of, or subdivision (d) of Section 2914 of, the Business and Professions Code.

[\(I\) A marriage and family therapist trainee performing activities and services as part of their supervised course of study as set out in Section 4980.42 of the Business and Professions Code.](#)

(5) For purposes of this section, “generally accepted standards of mental health and substance use disorder care” has the same meaning as defined in paragraph (1) of subdivision (f) of Section 1374.721.

(6) A health care service plan shall not limit benefits or coverage for mental health and substance use disorders to short-term or acute treatment.

(7) All medical necessity determinations by the health care service plan concerning service intensity, level of care placement, continued stay, and transfer or discharge of enrollees diagnosed with mental health and substance use disorders shall be conducted in accordance with the requirements of Section 1374.721. This paragraph does not deprive an enrollee of the other protections of this chapter, including, but not limited to, grievances, appeals, independent medical review, discharge, transfer, and continuity of care.

(8) A health care service plan that authorizes a specific type of treatment by a provider pursuant to this section shall not rescind or modify the authorization after the provider renders the health care service in good faith and pursuant to this authorization for any reason, including, but not limited to, the plan’s subsequent rescission, cancellation, or modification of the enrollee’s or subscriber’s contract, or the plan’s subsequent determination that it did not make an accurate determination of the enrollee’s or subscriber’s eligibility. This section shall not be construed to expand or alter the benefits available to the enrollee or subscriber under a plan.

(b) The benefits that shall be covered pursuant to this section shall include, but not be limited to, the following:

(1) Basic health care services, as defined in subdivision (b) of Section 1345.

(2) Intermediate services, including the full range of levels of care, including, but not limited to, residential treatment, partial hospitalization, and intensive outpatient treatment.

(3) Prescription drugs, if the plan contract includes coverage for prescription drugs.

(c) The terms and conditions applied to the benefits required by this section, that shall be applied equally to all benefits under the plan contract, shall include, but not be limited to, all of the following patient financial responsibilities:

(1) Maximum annual and lifetime benefits, if not prohibited by applicable law.

(2) Copayments and coinsurance.

(3) Individual and family deductibles.

(4) Out-of-pocket maximums.

(d) If services for the medically necessary treatment of a mental health or substance use disorder are not available in network within the geographic and timely access standards set by law or regulation, the health care service plan shall arrange coverage to ensure the delivery of medically necessary out-of-network services and any medically necessary followup services that, to the maximum extent possible, meet those geographic and timely access standards. As used in this subdivision, to "arrange coverage to ensure the delivery of medically necessary out-of-network services" includes, but is not limited to, providing services to secure medically necessary out-of-network options that are available to the enrollee within geographic and timely access standards. The enrollee shall pay no more than the same cost sharing that the enrollee would pay for the same covered services received from an in-network provider.

(e) This section shall not apply to contracts entered into pursuant to Chapter 7 (commencing with Section 14000) or Chapter 8 (commencing with Section 14200) of Part 3 of Division 9 of the Welfare and Institutions Code, between the State Department of Health Care Services and a health care service plan for enrolled Medi-Cal beneficiaries.

(f) (1) For the purpose of compliance with this section, a health care service plan may provide coverage for all or part of the mental health and substance use disorder services required by this section through a separate specialized health care service plan or mental health plan, and shall not be required to obtain an additional or specialized license for this purpose.

(2) A health care service plan shall provide the mental health and substance use disorder coverage required by this section in its entire service area and in emergency situations as may be required by applicable laws and regulations. For purposes of this

section, health care service plan contracts that provide benefits to enrollees through preferred provider contracting arrangements are not precluded from requiring enrollees who reside or work in geographic areas served by specialized health care service plans or mental health plans to secure all or part of their mental health services within those geographic areas served by specialized health care service plans or mental health plans, provided that all appropriate mental health or substance use disorder services are actually available within those geographic service areas within timeliness standards.

(3) Notwithstanding any other law, in the provision of benefits required by this section, a health care service plan may utilize case management, network providers, utilization review techniques, prior authorization, copayments, or other cost sharing, provided that these practices are consistent with Section 1374.76 of this code, and Section 2052 of the Business and Professions Code.

(g) This section shall not be construed to deny or restrict in any way the department's authority to ensure plan compliance with this chapter.

(h) A health care service plan shall not limit benefits or coverage for medically necessary services on the basis that those services should be or could be covered by a public entitlement program, including, but not limited to, special education or an individualized education program, Medicaid, Medicare, Supplemental Security Income, or Social Security Disability Insurance, and shall not include or enforce a contract term that excludes otherwise covered benefits on the basis that those services should be or could be covered by a public entitlement program.

(i) A health care service plan shall not adopt, impose, or enforce terms in its plan contracts or provider agreements, in writing or in operation, that undermine, alter, or conflict with the requirements of this section.

AMEND INSURANCE CODE §10144.5.

(a) (1) Every disability insurance policy issued, amended, or renewed on or after January 1, 2021, that provides hospital, medical, or surgical coverage shall provide coverage for medically necessary treatment of mental health and substance use disorders, under the same terms and conditions applied to other medical conditions as specified in subdivision (c).

(2) For purposes of this section, "mental health and substance use disorders" means a mental health condition or substance use disorder that falls under any of the diagnostic categories listed in the mental and behavioral disorders chapter of the most recent edition of the World Health Organization's International Statistical Classification of Diseases and Related Health Problems, or that is listed in the most recent version of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders. Changes in terminology, organization, or classification of mental health and substance use disorders in future versions of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders or the World Health

Organization's International Statistical Classification of Diseases and Related Health Problems shall not affect the conditions covered by this section as long as a condition is commonly understood to be a mental health or substance use disorder by health care providers practicing in relevant clinical specialties.

(3) (A) For purposes of this section, "medically necessary treatment of a mental health or substance use disorder" means a service or product addressing the specific needs of that patient, for the purpose of preventing, diagnosing, or treating an illness, injury, condition, or its symptoms, including minimizing the progression of an illness, injury, condition, or its symptoms, in a manner that is all of the following:

(i) In accordance with the generally accepted standards of mental health and substance use disorder care.

(ii) Clinically appropriate in terms of type, frequency, extent, site, and duration.

(iii) Not primarily for the economic benefit of the disability insurer and insureds or for the convenience of the patient, treating physician, or other health care provider.

(B) This paragraph does not limit in any way the independent medical review rights of an insured or policyholder under this chapter.

(4) "Health care provider" means any of the following:

(A) A person who is licensed under Division 2 (commencing with Section 500) of the Business and Professions Code.

(B) An associate marriage and family therapist ~~or marriage and family therapist trainee~~ functioning pursuant to Section 4980.43.3 of the Business and Professions Code.

(C) A qualified autism service provider or qualified autism service professional certified by a national entity pursuant to Section 1374.73 of the Health and Safety Code and Section 10144.51.

(D) An associate clinical social worker functioning pursuant to Section 4996.23.2 of the Business and Professions Code.

(E) An associate professional clinical counselor ~~or professional clinical counselor trainee~~ functioning pursuant to Section 4999.46.3 of the Business and Professions Code.

(F) A registered psychologist, as described in Section 2909.5 of the Business and Professions Code.

(G) A registered psychological assistant, as described in Section 2913 of the Business and Professions Code.

(H) A psychology trainee or person supervised as set forth in Section 2910 or 2911 of, or subdivision (d) of Section 2914 of, the Business and Professions Code.

(1) A marriage and family therapist trainee performing activities and services as part of their supervised course of study as set out in Section 4980.42 of the Business and Professions Code.

(5) For purposes of this section, “generally accepted standards of mental health and substance use disorder care” has the same meaning as defined in paragraph (1) of subdivision (f) of Section 10144.52.

(6) A disability insurer shall not limit benefits or coverage for mental health and substance use disorders to short-term or acute treatment.

(7) All medical necessity determinations made by the disability insurer concerning service intensity, level of care placement, continued stay, and transfer or discharge of insureds diagnosed with mental health and substance use disorders shall be conducted in accordance with the requirements of Section 10144.52.

(8) A disability insurer that authorizes a specific type of treatment by a provider pursuant to this section shall not rescind or modify the authorization after the provider renders the health care service in good faith and pursuant to this authorization for any reason, including, but not limited to, the insurer’s subsequent rescission, cancellation, or modification of the insured’s or policyholder’s contract, or the insurer’s subsequent determination that it did not make an accurate determination of the insured’s or policyholder’s eligibility. This section shall not be construed to expand or alter the benefits available to the insured or policyholder under an insurance policy.

(b) The benefits that shall be covered pursuant to this section shall include, but not be limited to, the following:

(1) Basic health care services, as defined in subdivision (b) of Section 1345 of the Health and Safety Code.

(2) Intermediate services, including the full range of levels of care, including, but not limited to, residential treatment, partial hospitalization, and intensive outpatient treatment.

(3) Prescription drugs, if the policy includes coverage for prescription drugs.

(c) The terms and conditions applied to the benefits required by this section, that shall be applied equally to all benefits under the disability insurance policy shall include, but not be limited to, all of the following patient financial responsibilities:

(1) Maximum and annual lifetime benefits, if not prohibited by applicable law.

(2) Copayments and coinsurance.

(3) Individual and family deductibles.

(4) Out-of-pocket maximums.

(d) If services for the medically necessary treatment of a mental health or substance use disorder are not available in network within the geographic and timely access standards set by law or regulation, the disability insurer shall arrange coverage to ensure the delivery of medically necessary out-of-network services and any medically necessary followup services that, to the maximum extent possible, meet those geographic and timely access standards. As used in this subdivision, to “arrange coverage to ensure the delivery of medically necessary out-of-network services” includes, but is not limited to, providing services to secure medically necessary out-of-network options that are available to the insured within geographic and timely access standards. The insured shall pay no more than the same cost sharing that the insured would pay for the same covered services received from an in-network provider.

(e) This section shall not apply to accident-only, specified disease, hospital indemnity, Medicare supplement, dental-only, or vision-only insurance policies.

(f) (1) For the purpose of compliance with this section, a disability insurer may provide coverage for all or part of the mental health and substance use disorder services required by this section through a separate specialized health insurance policy or mental health policy. This paragraph shall not apply to policies that are subject to Section 10112.27.

(2) A disability insurer shall provide the mental health and substance use disorder coverage required by this section in its entire service area and in emergency situations as may be required by applicable laws and regulations. For purposes of this section, disability insurance policies that provide benefits to insureds through preferred provider contracting arrangements are not precluded from requiring insureds who reside or work in geographic areas served by specialized health insurance policies or mental health insurance policies to secure all or part of their mental health services within those geographic areas served by specialized health insurance policies or mental health insurance policies, provided that all appropriate mental health or substance use disorder services are actually available within those geographic service areas within timeliness standards.

(3) Notwithstanding any other law, in the provision of benefits required by this section, a disability insurer may utilize case management, network providers, utilization review techniques, prior authorization, copayments, or other cost sharing, provided that these practices are consistent with Section 10144.4 of this code, and Section 2052 of the Business and Professions Code.

(g) This section shall not be construed to deny or restrict in any way the department’s authority to ensure a disability insurer’s compliance with this code.

(h) A disability insurer shall not limit benefits or coverage for medically necessary services on the basis that those services should be or could be covered by a public entitlement program, including, but not limited to, special education or an individualized education program, Medicaid, Medicare, Supplemental Security Income, or Social Security Disability Insurance, and shall not include or enforce a contract term that

excludes otherwise covered benefits on the basis that those services should be or could be covered by a public entitlement program.

(i) A disability insurer shall not adopt, impose, or enforce terms in its policies or provider agreements, in writing or in operation, that undermine, alter, or conflict with the requirements of this section.

(j) If the commissioner determines that a disability insurer has violated this section, the commissioner may, after appropriate notice and opportunity for hearing in accordance with the Administrative Procedure Act (Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code), by order, assess a civil penalty not to exceed five thousand dollars (\$5,000) for each violation, or, if a violation was willful, a civil penalty not to exceed ten thousand dollars (\$10,000) for each violation.