

Volume 39, Issue 2
Winter 2013

Ohio Counseling Association GUIDELINES



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CALL FOR MANUSCRIPTS

Attention professionals, students and counselor educators; please consider submitting your papers, ideas or proposals to the *Guidelines*. Each issue strives to provide information on legal/ethical issues, advocacy, current trends, student perspectives and articles from professionals in the field. OCA will take into consideration all manuscripts. Manuscripts can be directed to the content editor, Chad Yates, at: macros65@gmail.com

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PRESIDENT'S MESSAGE

Dear Members of OCA,

It is New Year Greetings to each one of you. I hope that you have had a joyous holiday season and I wish you a happy, healthy, and fulfilling 2013. I wish that the New Year will bring many wonderful professional opportunities your way and that you will take joy in the privilege of being a counselor. The older I get, the more I realize the vital role connectedness plays in our lives. And so I wish you meaningful relationships and an abundance of love and care to give and receive.

Last November, we came together for the All Ohio Counselors Conference 2012. What a resounding success it was! Thank you to the many OCA members who expressed their appreciation of the conference and the sessions to me personally. On my part, I would like to thank all our conference attendees for supporting the AOCC, thank our presenters for sharing their expertise with us, and thank our many volunteers for their time and enthusiasm for OCA. And I would like to extend a very big thank you to my fellow conference planning team members: Angel Rhodes, President, Ohio School Counselor Association, Shawn Grime, OCA Technology Director, and Tim Luckhaupt, OCA Executive Director. Tim and Shawn worked tirelessly behind the scenes to keep the conference running smoothly – and their efforts certainly showed. It was a great honor to have Dr. Brad Erford, President of the American Counseling Association (ACA) join us at the AOCC. We can claim Brad as one of our own as he was born in Ohio! Thank you Brad for your energy and commitment to the profession of counseling!

Now that AOCC 2012 is behind us, we can turn our attention to the ACA conference in Cincinnati March 20-24, 2013. How wonderful to have our colleagues from all over the USA and beyond converging on Ohio to focus on counseling. We get to play “host” – let us show our colleagues what makes Ohio and Ohioans special. OCA will be hosting a reception at the ACA conference – we will post information on the OCA reception on our website and send out details on the listserv. If you have not attended an ACA conference before this would be a great opportunity to do so without incurring the cost of a flight. ACA is offering a special one-day registration of \$99.00 for counselors from Ohio and Kentucky. If you can only attend one day this might be of interest to you.

The OCA Executive Council has been working hard to grow OCA and move us forward through a variety of programs and initiatives. This year, we would like you to know more about the goals our chapters, divisions, and committees are working on. Please check out the link “OCA Executive Council Goals” if you’d like to know more. Remember, OCA is your organization – so please reach out to members of the Executive Council and share your thoughts about how OCA can work for you more effectively. Please take note of the outstanding candidates we have running for OCA President for 2014-2015 and make sure you vote.

Finally, please mark your calendars for Tuesday April 16, 2103, for our annual Legislative Advocacy Day. Spend the morning with us advocating for our profession at the Statehouse. If you have never participated in this event, we provide attendees with the training and information needed to talk with your senators and representatives about how counselors can contribute to the mental health and well-being of children, adolescents, and adults of every age. We are continuing to garner support for counselors to be an integral part of services offered to veterans. The cost of \$50.00 for this half day event is so reasonable and lunch is included. Come and work with us to strengthen our profession in Ohio.

Yours in service,

Christine Suniti Bhat, PhD, PC

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“The first-hand experience of being a minority and being stereotyped by the majority in South Africa stirred various emotions and thoughts; such as, confusion, uneasiness, surprise, irritation, fear, frustration, and sadness.”

Inside-Out Approach to Multicultural Competence

By Dr. Kyoung Mi Choi

Being a second year assistant professor at Youngstown State University, introducing myself to new graduate students each semester is still not an easy task for me. So many questions, ‘Where should I start?’ ‘How to make my name easy for my students to remember and pronounce?’ ‘How much time do I want to spend introducing my background and the reasons why I am here?’ are continually floating in my mind until the very last minute of the first classes.

I am very aware that the majority of the students in my program are White European Americans who have never left this continent or even Ohio, who were born or have lived in Youngstown, and have a very limited experience with befriending other races or ethnicities. Considering the fact that I am from Korea and have a thick Korean accent whenever I speak English, I was not sure what my students’ experiences of having me, as their professor and advisor would be like. Despite my concerns, I am very fortunate that my experiences with my students have been very warm, cooperative, and positive. Most of my students have showed great respect and curiosity toward my

cultural background and my professorship.

However, this summer’s cross-cultural immersion experience brought forth once more the question, “Oh, why on earth am I in Ohio, which is about 7000 miles away from my family, friends, and home town?” At the same time, I was reminiscing about my sophomore year of college. I still vividly

remember the smells and sights of Dhaka’s (the capital of Bangladesh) airport gates widely opening. It was a totally different and indescribable world right in front of me. Until that moment, my life was very sheltered. My life dreams, goals, and plans were limited to my culture and country. I did not really know what else could exist beyond. Seeing Bangladeshi culture, life styles, education system, language, religious practices, and people was

shocking at first, and that opened my eyes to multiculturalism. Since then, my strong desire to see other cultures and countries has not ceased. I have become a global nomad in many different parts of the world, including India, Nepal, Egypt, France, Switzerland, Germany, and South Africa. I have taken many different roles such as student, volunteer worker, educator, project leader, and faculty



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representative in those trips. I strongly believe that I would not be here without that first immersion experience in my early 20's.

Almost a decade later, my latest cross-cultural experience in South Africa during the Summer of 2012 brought back old memories of when I first encountered a new culture. Youngstown State University has offered the graduate level course, International Area Study: Project Learning Around the World (PLATW) each summer since 2011. This class is designed to enhance students' level of sensitivity and competence through cross-cultural excursion experience and community services in developing countries. I accompanied nine students and one professor on the trip as a faculty representative. My role was more like a researcher who tried to understand what it takes to design and implement a cross-cultural immersion course, and to observe how that type of course affected students' multicultural competence.

I witnessed that the students in the PLATW immersion trip had gone through various cognitive and emotional changes. Initial excitement, curiosity, and eagerness to see a new a culture were replaced with a great cultural shock by witnessing extreme poverty, different life styles, and physical surroundings. One of the students described his interactions with kids in impoverished settings in South Africa saying, "I wasn't prepared, I don't think to be around these kids... I don't know if there is any preparation that would have helped get me prepared." Another student expressed her surprise witnessing poverty saying "I definitely expected it but not to that extent. I have never seen so many people without running water."

The first-hand experience of being a minority and being stereotyped by the majority in South Africa stirred various emotions and thoughts; such as, confusion, uneasiness, surprise, irritation, fear, frustration, and sadness. One student described his reaction to the stereotypes that Africans had towards Americans, "In my head, Americans are loud and abrasive...I always try to monitor my behavior in different settings. I didn't want to reinforce that stereotype." Another participant shared her increased sensitivity towards the nature of


stereotypes saying, "Just a lot of assumptions about how we should feel, or what we think, rather than openness to asking us and really hearing what we had to say."

Above all, the most exciting aspect about the immersion experience was the changes that occurred within the student's personal and professional lives after the trip. Many of the students reported that they became more appreciative about their own culture, diversity, and life itself. One student reported, "I am more open to other cultures, I can't just judge from watching a TV show or reading about it. Now, since I've experienced it, I know now that in order to fully understand the culture you really have to go there and experience it and be open to it." Another student said "it helped me step up with a lot of organizations, and with writing and helping with the homeless that I didn't feel before. I feel that I should give back to the community."

The core multicultural skills that the students gained were listening skills, cross-cultural empathy, and openness. One student commented on her active listening skills saying, "My listening skills have definitely improved, I really try and listen to what people say and really listen for the point that they are trying to get across and not just take it at face value." Another student described her understanding of cross-cultural empathy saying, "Coming into the counseling program, we were talking about empathy, listening to people's story and what they are going through, and being able to meet them where they are in their lives. To really hear about the situations that are happening in their lives and appreciating people for who they are and what they are going through."

Based on my personal cross-cultural experiences and my teaching experiences (I have taught a graduate level Multicultural Counseling course for three consecutive summers from 2008 to 2010), I believed that I had some ideas to enhance students' learning in multiculturalism. In fact, most of my previous students reported that they gained a great deal of cross-cultural sensitivity and understanding of privilege and diversity. However, I realized that my traditional teaching training modalities, including didactic lecture, reflection

papers, discussion, readings, role-playing, educational video, and movie clips were very limited. As a counselor educator, this trip helped me become more aware of the importance of hands-on cross-cultural experiences. Like Dr. Ellenwood (the coordinator of the PLATW and professor and program director in School Psychology at YSU) who witnesses the effectiveness of the Inside-Out approach (Ellenwood & Snyder, 2006) in Multicultural education, I also believe that the real changes and multicultural development should start from the inside of us, and then express outward. My summer immersion trip with the master's level counseling students has inspired me to have a grasp on what works and does not work for counseling students' learning in the immersion process. At the same time, it made me also understand the complexity of this process and student development in multicultural awareness, skills, and knowledge.

If you ask me why I am here, I might answer that it is all about the process. I believe that living and teaching in Ohio has given me an opportunity to examine myself, to understand different cultures, values and lifestyles, and to develop meaningful relationships with my students and colleagues. My journey to become a competent multicultural counselor educator continues...I hope it will never end. 

Dr. Kyoung Mi Choi is an Assistant Professor in the Counseling Department at Youngstown State University. She can be reached at kchoi@ysu.edu.

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Congratulations to the following OCA Award recipients for their achievement and contributions to the counseling profession in Ohio. These individuals were recognized at the awards ceremony held at the All Ohio Counselors Conference on Thursday, November 1, 2012.

Charles "Chuck" Weaver Award - Dr. Sheila Williams

Dave Brooks Award - Dr. Christopher Roseman

Herman J. Peters Award - Mary Vicario

Susan J. Sears Counselor of the Year Award - Dr. Varunee Faii Sangganjanavanich

Research Writing Award - Dr. Dilani Perera-Diltz

Public Policy Legislation Award - Dr. Victoria White Kress

Past President Award - Dr. David P. Mann



Understanding the “ALGBTIC Competencies for Counseling Lesbian, Gay, Bisexual, Queer, Questioning, Intersex and Ally Individuals” for Clinical Practice

By Pete Finnerty

LGBTQQIA (lesbian, gay, bisexual, transgender, queer, questioning, intersex and ally) issues are consistently present in our schools, communities and counseling spaces. Counseling and related educational professionals continually respond to these types of issues but often without the broad knowledge base that should be afforded to such a large yet marginalized population. Many counselors wonder, “How can I make my office or organization a safe place to discuss issues involving orientation or gender expression?” Others may wonder, “How can I advocate for social justice on behalf of LGBTQQI clients and students?” The recently released ALGBTIC (Association of Lesbian, Gay, Bisexual and Transgender Issues in Counseling) Competencies for Counseling LGBTQQIA Individuals (approved by the ALGBTIC Board and in press, 2012) were designed to further the knowledge and competency of counselors and related professionals through research, relevant practice and theory. The LGBTQQIA Competencies can assist professionals in developing a basic competency and understanding of LGBTQQIA issues. The document also includes new sections on being an effective ally for the LGBTQQIA community and references the most pronounced literature to date on working with persons who are intersex.

The current competencies began in development in 2009 when Michael Kocet (then-President of ALGBTIC) convened a diverse taskforce to update the previous LGBT Competencies (2003). Diversity of the authors of the LGBTQQIA Competencies (2012) was represented on many fronts including ethnicity, area of practice, orientation and gender expression. To create specificity from the original LGBT Competencies (2003) the American Counseling Association’s (ACA) Competencies for Counseling Transgender Clients (2010) were developed to suite the specific counseling needs of persons who are transgender. The Transgender Competencies were written utilizing the Council for Accreditation of Counseling and Related Educational Programs (CACREP) 2009 Standard Sections of Human Development, Social and Cultural Foundations, Helping Relationships, Group Work, Professional Orientation and Ethical Practice, Career and Lifestyle Development, Assessment and Research and Program Evaluation. The Transgender Competencies informed the LGBTQQIA Competencies through the use of the CACREP Standards and by setting the standard for how to effectively create a single document that speaks to many issues of relevance for such a diverse community. Together these two documents serve the entire LGBTQQIA community through a strength-based, feminist, multicultural, social-justice perspective.

To create the competencies, LGBTQQIA Competencies Taskforce members volunteered to work on specific areas of the CACREP Standards and/or the Ally and Intersex sections. After exhaustingly reviewing the research, theory, and current clinical practice of these areas taskforce members came together to begin editing the document. After several rounds of editing and development by the full committee on biweekly




“How can I make my office or organization a safe place to discuss issues involving orientation or gender expression?”

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conference calls the taskforce sent the document to three outside reviewers for external review, and then to the ALGBTIC Board for approval. After three years of work to complete the LGBQQIA Competencies have been approved by the ALGBTIC Board, and are awaiting approval from the ACA Governing Council. The LGBQQIA Competencies are currently in press in an upcoming issue of the Journal of LGBT Issues.

The process undertaken to create the LGBQQIA Competencies has been noted because it gives the backdrop for how much energy and research went into the wide-ranging document. As one of the authors and co-chairs I would like to extend a personal statement for our readers. We cannot stop at a single document regardless of its usefulness. The competency one gains from the document must be supplemented by actual clinical practice and continued gains in knowledge through workshops and reading of relevant literature. This is not only true in learned knowledge but also in personal action on the micro, meso and macro levels. The ally section, of the LGBQQIA Competencies includes an area on being an effective ally and another on counseling an ally. Being an effective ally is particularly relevant in establishing action to your practice. Some examples of how to be an effective ally include: familiar with LGBTQQIA literature/films/culture, learning about and/or advocating for local/state/national LGBTQQIA issues and policies, and using an affirmative, strength-based therapeutic modality in your work with community members.

The section on counseling a person who is intersex also offers particular relevance to the area of action-oriented counseling. For those not familiar with persons who are intersex the LGBQQIA Competencies define an intersex person as “An individual who was born with both male and female characteristics in their internal/external sex organs, hormones, chromosomes, and/or secondary sex characteristics, formerly termed hermaphrodite” (p. 43). Historically persons who are intersex have experienced many levels of discrimination and even physical torment from others making decisions about their biological sex. The authors make note of advocacy on part of the counselor to be particularly relevant in opposing “any practices that promote forced changes (in regards to biological sex) on intersex persons” (p. 6). Again, an initiative on part of the counselor to advocate for clients, students and the community as a whole integrates an understanding of the issues with actual practice in the field. In regards to rubrics for practice the LGBQQIA Competencies outline the disadvantages of a concealment-centered model while noting the benefits of a client-centered model of treatment. The LGBQQIA Competencies delineate how to effectively support equal treatment medically, socially and psychologically from both within and outside the medical community.

The ALGBTIC Competencies for Counseling LGBQQIA Individuals and ACA’s Competencies for Counseling Transgender Clients can be found at ALGBTIC’s newly improved website, www.algbtic.org, and ACA’s website, <http://www.counseling.org>. Please utilize the references sections in both documents to find relevant and specific information on issues, evidence-based practice and affirmative therapies for LGBTQQIA persons. Other relevant sources of literature include the ALGBTIC site that holds an extensive resource list, newsletter and (through joining the organization) unfettered access to the Journal of LGBT Issues in Counseling. 

Pete Finnerty is President of ALGBTIC and Co-Chair of the LGBQQIA Competencies Taskforce. He is also a Doctoral Candidate at Kent State University and LPC at Counseling for Wellness LLC. He can be reached at pfinnert@kent.edu.

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Interview with ACA President Dr. Bradley Erford

By Chad Yates, Ph.D., LPC

This fall I was able to interview the American Counseling Association's President, Dr. Bradley Erford. While we talked, Dr. Erford was on the move visiting many of the wonderful fall conferences that ACA's divisions and state chapters were conducting. Dr. Erford visited the All Ohio Counseling Conference this fall and conducted a preconference workshop on 35 Techniques Every Counselor Should Know. He also conducted a meet the presidents panel with OCA President, Dr. Christine Suniti Bhat and OSCA President Dr. Angel Rhodes.



Yates: You were born in Ohio, any cherished memories from the time you spent here?

Erford: I was born in Lima, Ohio and lived nearby until my family moved to western PA. I grew up in a very rural area, Miller City, and we owned a farm bordering the town's pond. My little brother and I spent many-a-day exploring around the surrounding woods and fields, and swimming in this huge body of water that seemed to go on forever. Of course, years later as an adult, I now realize how tiny the pond and surrounding area really was. The pond probably was about four to five football fields in area, but to a 7-year-old it was an immense wilderness worthy of years of exploration. Almost all of my relatives still live in that small town and I get back there almost every year for the family reunion.

Yates: Is there anything interesting happening this year from ACA? Or what big plans (other than the conference) does ACA have this year?

Erford: ACA is on the move, 51,000 members strong. The web site redesign should be completed in early 2013 and we are squarely focused on our members' needs and the needs of their clients. We are developing new materials and programs to help professional counselors practice more efficiently and effectively, and are working on membership recognition programs that will help counselors develop that connection to ACA early on in their careers as student members. Social media has been a primary focus of the ACA staff over the past year. We are focusing on connecting with members to help them realize they have a life-long home with our professional association. Licensure portability and employment opportunities continue to be a primary focus, and we are exploring how best to collaborate with counseling associations around the globe to promote the internationalization of counseling. Hopefully helping them to avoid the mistakes we have made in the United States.


Yates: OCA like ACA has similar goals for promoting the professional identity of counselors, how has ACA started to tackle these goals, and do you have any suggestions for state chapters?

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Erford: Promoting counselor identity is the premier challenge of our time, and the advances we make in this generation will determine the future trajectory of the counseling profession. Ohio is a phenomenal counselor education haven, with so many terrific universities with outstanding counselor education programs, and counseling “greats”! The All Ohio Counseling Conference each November is a remarkable annual event, and in

March 2013 the ACA conference will be in Cincinnati. This will be a magnificent opportunity for counseling students and professionals to connect with the counseling profession. Like OCA, ACA is focusing on bridging the professional connection. We need to do a MUCH better job convincing our student members that staying involved with their professional associations is the BEST way to guarantee their future careers. As a profession that focuses upon and promotes advocacy in our training programs, there is a real and troubling disconnect for our graduate students. For some reason, most of our student members do not continue their memberships in their professional associations, and instead leave their professional futures to the capricious whims of politicians, employers, health care organizations, and other mental health professions trying to reduce our opportunities in the marketplace. If we are unable to orient our next generation of professional counselors to understand the importance of speaking with a unified voice, we will become a fractured profession in decline, at a time when counseling is growing far faster in other countries than other mental health professions. Professional advocacy and professional membership is critical to our future. Think, if two counseling advocates approach a legislator, and one says, “I represent 1,000 Ohio counselors,” while the other says, “I represent 10,000 Ohio counselors,” who is going to have a stronger voice? Numbers translate into support, jobs, higher salaries, and votes.

Yates: What can the counselors throughout Ohio do to help make the ACA conference a smashing success?

Erford: COME TO CINCINNATI and bring all of your colleagues, friends, and students. Fabulous learning institutes and content sessions already have been selected and the keynote speakers will be magnificent. Ashley Judd has a marvelous message of trauma, recovery, hope, and resilience; her address will be moving and captivating. Additionally, Allen and Mary Bradford Ivey will have cutting edge information about the promise that neuro-psych advances have in counseling. Throw in the networking opportunities, seeing old friends, and meeting lots of new friends, and you have an outstanding professional development opportunity in a great venue! (Please visit <http://www.counseling.org/Convention/> for more information about the conference) 



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OCA NEWS

Upcoming 2013 Election

OCA will be running elections for president-elect sometime this spring. The election process will be held electronically and all qualified voting members of the association will receive an email at that time with a unique link to access the election and cast their vote. We have two candidates this year: Gregg Pollock and Victoria Kress. To learn more about these candidates, visit the OCA website at www.ohiocounseling.org and download their biographies and presidential statements.



Victoria Kress



Gregg Pollock

OHIO STATEHOUSE REPORT

By Towner Policy Group



NOTE: *This report was last updated on November 30, 2012, so the information in this report will have changed. December of even numbered years is a very busy month legislatively. It is the end of the legislative session (which lasts 2 years). Legislation not passed by the end of the year will have "died" and need to be re-introduced in 2013. Also, some the legislation mentioned in this article will have been sent to the Governor for his signature.*

House Bill 567 Passes Committee: Pollock Testifies on OCA's behalf

Representative Barbara Sears (R – Sylvania) has introduced House Bill 567 on behalf of the Ohio Counselor, Social Worker and Marriage and Family Therapists Board. The bill makes changes to the accreditation of counseling programs in Ohio. By January 1, 2018, Ohio graduate degree programs in counseling will have to be CACREP. OCA is agreeable to this change. This legislation also allows the licensure board to approve degrees from out of state programs (and possibly other in-state programs) that are not CACREP accredited counseling programs. OCA did not think that the bill as introduced went far enough to protect the professional identity and integrity of counselors in Ohio. Additionally the bill does the following:

- Adds Counselors to the three professional association and corporation laws that allow them to be part of a group practice including a broad variety of other licensees.
- Establishes that a relationship between a counselor and client is a privileged relationship.

HB 567 was considered by the House Health and Aging Committee. Bill sponsor Representative Sears and Board Executive Director Jim Rough testified on November 28, 2012. The next day, November 29, 2012, Gregory Pollock, OCA's Co-Chair of Government Affairs, testified before the Health Committee. Pollock requested an amendment to ensure that even if a program is not CACREP accredited,

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the program, at a minimum should be a counseling program. After his testimony the committee accepted the requested amendment, so OCA is now fully supportive of the changes made in HB 567. This bill could very possibly make its way through the legislative process before the end of 2012. It was reported out of the Health Committee at the November 29th hearing.

Legislation Introduced to Expand Insurance Coverage for Autism; ABA Services Included

On October 25, 2012, Representatives Cheryl Grossman (R – Grove City), Louis Terhar (R – Green Township), Ted Celeste (D – Columbus) and Nancy Garland (D – New Albany), along with Senator Bill Seitz (R – Cincinnati), joined together to announce the introduction of legislation that would expand insurance coverage for autism spectrum disorder in Ohio. House Bill 598 and Senate Bill 381 would expand the Mental Health Parity Act 2007 to include coverage for autism. The bill was currently undergoing hearings before the House and Senate Health Committees. Specifically, the bill amends the sections of the law related to insurance coverage and the types of services that must be covered. It adds “pervasive developmental disorders” to the definition of “biologically based mental illness”. “Pervasive developmental disorder” means all of the following as they are defined in the most recent edition of the diagnostic and statistical manual of mental disorders as published by the American Psychiatric Association: 1) Autistic disorder; 2) Asperger's disorder; 3) Pervasive developmental disorder-not otherwise specified; 4) Rett's syndrome; 5) Childhood disintegrative disorder. The bill amends the section of law that defines “basic healthcare services” that must be covered under health insurance. It adds that “coverage for diagnostic and treatment services for biologically based mental illnesses related to pervasive developmental disorders shall include **applied behavior analysis** when provided or supervised by an analyst certified by the behavior analyst certification board or by a state licensed physician or psychologist, or a mental health professional, as defined in division (A)(1)(d) of section 2305.51 of the Revised Code, so long as the services performed are commensurate with the physician's, psychologist's, or mental health professional's training and supervised experience. Such coverage shall include the services of the personnel who work under the supervision of the analyst certified by the behavior analyst certification board or the licensed physician or psychologist or the mental health professional.” The bill defines “applied behavior analysis” (ABA) as the design, implementation, and evaluation of environmental modifications using behavioral stimuli and consequences to produce socially significant improvement in human behavior, that is delivered in a home or clinic setting to address core deficits resulting from a medical diagnosis of pervasive developmental disorder. “Applied behavior analysis” includes the use of direct observation, measurement, and functional analysis of the relationship between environment and behavior. What this means is that the ABA services could be provided by counselors because counselors are included in the definition of a mental

health professional under section 2305.51. However, individuals who are “an analyst certified by the behavior analyst certification board” could also provide ABA services for reimbursement. These individuals would not need to meet any additional requirements by the State of Ohio.

Healthcare Worker ID Badge Requirement

Representatives Anne Gonzales (R – Westerville) and Lynn Wachtmann (R – Napoleon) have introduced House Bill 607. The bill will require certain health care professionals to wear, when providing direct patient care, an identification card, badge, or similar device that includes a photograph of the professional and specifies the license held by the professional and to make certain changes regarding advertising for health care services. Specifically the bill would require that at all times when providing direct patient care, a health care professional shall wear an identification card, badge, or similar device that includes all of the following:

- A recent photograph of the professional;
- The professional's name;
- The type of license held by the professional;
- The expiration date of the professional's license.

Additionally the bill would require all advertisements for health care services that name a health care professional who provides direct patient care to identify the type of license held by the professional. Licensees who do not comply with the requirements of this legislation would be subject to disciplinary action by their licensure board. We will likely see this issue be re-introduced next session.

Telehealth Services Coverage

House Bill 609, sponsored by Representatives Lynn Wachtmann (R – Napoleon) and Anne Gonzales (R – Westerville), pertains to telehealth service coverage. The bill provides that insurance plans, including Medicaid, may cover telehealth services and if the plans do include telehealth services, they must be covered and reimbursed in the same manner as in-person services. “Telehealth” is defined to mean the use of interactive audio, video, and other telecommunications technology by a health care provider to deliver health care services between a distant site and an originating site for diagnosis and treatment of a patient. “Telehealth service” means a health care service provided through telehealth, including a service provided through a synchronous interaction or asynchronous store and forward action. The bill was heard in House Health and Aging Committee on November 28 and November 29, 2012. If this does not pass by the end of the year, we will likely see this issue be re-introduced next session.