

Behavioral Health Sub-Report

Clinical Mental Health Counseling

Overview

The practice of clinical mental health counseling is regulated in all 50 states. In Utah, the regulation of clinical mental health counseling is overseen by the Division of Professional Licensing, Department of Commerce. Current license types include Clinical Mental Health Counselor (CMHC) and Associate CMHC (ACMHC).

License Type	Scope	Authority	Education	Experience	Exam
CMHC	Mental Health Therapist	Independent	Master's Degree	✓	✓
ACMHC	Mental Health Therapist	Supervised	Master's Degree	-	-

Fee Structure

License Type	Initial Licensing Fee		Annualized Renewal Fee	
	Utah Fee	US Median	Utah Fee	US Median
CMHC	\$120	\$200	\$47	\$84
ACMHC	\$85	\$138	\$0	\$47

Complaints

During the past 5 years (2018-2022), an average of **107** complaints were filed annually against an average of **59** Utah clinical mental health counselors—or **2.8%** of active licensees in any given year. On average, **32** of those complaints were found to be substantiated (30%).²² Common types of substantiated complaints among behavioral health licensees include violations of ethical standards, incompetence and/or negligence, sexual misconduct, criminal conduct, substance use, unauthorized practice, and failure to release records.

²² OPLR Analysis of DOPL Substantiated Complaint Data

Wait Times and Active Licensees

On average, Utah clinical mental health counselors report that at their primary practice location there is a **~33 day wait time** for those seeking care. This is lower than the **~37 day** average across Utah’s behavioral health care field, but is still substantially higher than the **10 day CMS** guideline.^{23,24}

Name	# Active Licensees	Annualized 5-Year Growth Rate ²⁵
CMHC	2,247	12.83%
ACMHC	631	11.08%
All	2,895 ²⁶	12.13%

Recommendations

Relevant Recommendations from OPLR’s Periodic Review

The following recommendations from OPLR’s periodic review of the regulation of the behavioral health care workforce are relevant for clinical mental health counseling (see final report for additional information):

- 1a. Supervisor Requirements
- 1b. Supervision Hours
- 1c. Continuing Education
- 2a. Exam Alternate Path
- 2b. Interstate Compacts
- 3a. Recovery Assistance (UPHP)
- 3b. Safety Checks & Disclosures
- 5a. Multi-Profession Board

Additional Recommendations

In addition to the relevant recommendations listed above, OPLR recommends that Utah policymakers enact the following changes to the regulation of clinical mental health counselors.

- **Clinical Exam Requirement.** Require applicants for licensure as a clinical mental health counselor (CMHC) to pass only the National Clinical Mental Health Counseling Examination (NCMHCE) instead of requiring both the NCMHCE and the National Counselor Examination (NCE). (*R156-60c-302b*)
- **Equivalent Field Licensure Pathway.** Streamline and strengthen the requirements for licensure through an “equivalent field” by requiring that candidates pass the National Counselor Examination (NCE), and by continuing to require verification only of 1) graduate-level coursework in clinical diagnosis, 2) graduate-level coursework in ethical practice, and 3) a practicum/internship. (*58-60-405; R156-60c-102*)

²³ OPLR Behavioral Health Care Workforce Survey (CPMDS)

²⁴ Centers for Medicare & Medicaid Services Center for Consumer Information and Insurance Oversight (2022). *2023 Letter to Issuers in the Federally-facilitated Exchanges*. [online] U.S. Department of Health and Human Services. Available at: <https://www.cms.gov/files/document/2023-draft-letter-issuers-508.pdf>

²⁵ OPLR Analysis of DOPL Licensing Data

²⁶ The number of clinical mental health counselors and associate clinical mental health counselors do not sum to the total number of active licensees due to holders of license subtypes not listed above (e.g., interns).

Clinical Exam Requirement

Summary of Recommendation

Require applicants for licensure as a clinical mental health counselor (CMHC) to pass only the National Clinical Mental Health Counseling Examination (NCMHCE) instead of requiring both the NCMHCE and the National Counselor Examination (NCE).²⁷ (R156-60c-302b)

Status Quo. Currently, incoming clinical mental health counselors in Utah must pass two exams—the National Clinical Mental Health Counseling Examination (NCMHCE) and the National Counselor Examination (NCE)—in order to qualify for licensure.²⁸ The NCMHCE is designed to evaluate counselors’ application of knowledge and skills by presenting case studies, which must be answered by a narrative explanation and several multiple-choice questions.²⁹ The NCE is multiple-choice only and is designed to assess understanding of more discrete counseling theory, knowledge, and skills.³⁰

Existing Approaches. Nationwide, **11** states (including Utah) require both of these exams—Idaho, Illinois, Indiana, Kansas, Maine, New Mexico, Ohio, South Dakota, Tennessee, Vermont.³¹ **40** jurisdictions require only one of these exams—with **8** requiring the NCMHCE, **12** requiring the NCE, and **20** accepting *either* of the exams currently required in Utah. Utah also used to require only one exam—the NCMHCE. Stakeholders shared the context that the addition of the NCE requirement was made, in part, to accommodate for the varying educational paths allowed through the equivalent field licensure pathway (discussed in the recommendation that follows).

Rationale. The current dual exam requirement may be unnecessarily burdensome for incoming clinicians, and CMHCs are now the only master’s-level Utah clinicians required to pass more than one licensure exam (the requirement that clinical social workers pass two exams was removed in 2023). Many Utah practitioners shared concerns regarding the “overwhelming” time and financial costs involved, particularly for candidates who may need to take one or both exams multiple times.³² Several practitioners reflected that the two-exam requirement is “excessive,” referring to it as “overkill” and arguing that one exam should be “sufficient.” In short, the current requirement is seen by many as unnecessarily burdensome without being clearly “needed or helpful” for improving patient safety.

²⁷ Please note, this change would require modifying administrative rule only, not statute.

²⁸ [R156-60c-302b](#); see also [UCA 58-60-405](#).

²⁹ National Board for Certified Counselors (2023). *Content Outline: The National Clinical Mental Health Counseling Examination (NCMHCE)*. [online] nbcc.org. Available at: https://www.nbcc.org/assets/exam/ncmhce_content_outline.pdf.

³⁰ National Board for Certified Counselors (2023). *Content Outline: The National Counselor Examination (NCE)*. [online] nbcc.org. Available at: https://www.nbcc.org/assets/exam/nce_content_outline.pdf

³¹ Illinois accepts the NCMHCE and NCE, but also provides other exam alternatives.

³² OPLR Listening & Vetting Tour; OPLR Behavioral Health Care Workforce Survey (CPMDS)

Burden of Qualifying Exams for Master’s-Level Clinical Therapist Licensure			
	Required Exam(s)	Cost Per Attempt	Wait Time Between Attempts
Licensed Clinical Social Worker	ASWB Clinical	\$260 ³³	90 days ³⁴
Marriage & Family Therapist	MFT	\$365 ³⁵	90 days ³⁶
Clinical Mental Health Counselor	NCMHCE	\$275 ³⁷	90 days ³⁸
	NCE	\$275 ³⁹	90 days ⁴⁰
	<i>CMHC Total</i>	\$550	-

Each of the required licensing exams for CMHCs costs \$275 per attempt, for a minimum cost of \$550 total. This is substantially higher than the cost for licensed clinical social workers (LCSWs) and marriage and family therapists (MFTs)—whose minimum cost to pass qualifying licensing exams is \$260 and \$365, respectively. Agency administrators reflected that, “The NCMHCE is the exam that we have the most repeats on”—meaning that compared to other licensing exams, passing the NCMHCE more often requires multiple attempts.⁴¹ Thus, compared to other clinical therapists, the financial burden of testing for incoming CMHCs may be substantially higher, not only by virtue of every applicant being required to pay for both exams, but also because a higher proportion of applicants will need to pay exam fees more than once. Further, the logistical burden of passing both exams may be substantial. At present, applicants may only register for the required CMHC licensing exams one at a time, meaning that exam attempts must be spaced out sequentially.⁴² If a test-taker does not pass the exam in the first attempt, there is a mandatory waiting period of 90 days before they may retake the exam. While this is the same waiting period required for LCSWs’ and MFTs’ qualifying exams, again, by virtue of having a two-exam requirement, it may be significantly more time-consuming for CMHCs to complete licensing exams.

³³ Association of Social Work Boards (2022). *ASWB Exam Candidate Handbook*. [online]. ASWB.org. Available at: <https://www.aswb.org/wp-content/uploads/2020/11/Candidate-handbook-06-2021.pdf>.

³⁴ Ibid.

³⁵ Association of Marital & Family Therapy Regulatory Boards (2023). *Handbook for Candidates of the AMFTRB Marital and Family Therapy National Examination*. [online] Professional Testing Corporation. Available at: <https://ptcny.com/pdf/AMFTRB2023.pdf>.

³⁶ Ibid.

³⁷ Center for Credentialing Education (2023). *Assessments and Exams*. [Email]. Communication from a customer service representative for the Center for Credentialing Education.

³⁸ National Board for Certified Counselors (2023). *Content Outline: The National Clinical Mental Health Counseling Examination (NCMHCE)*. [online] nbcc.org. Available at: https://www.nbcc.org/assets/exam/ncmhce_content_outline.pdf.

³⁹ Ibid.

⁴⁰ National Board for Certified Counselors (2023). *Content Outline: The National Counselor Examination (NCE)*. [online] nbcc.org. Available at: https://www.nbcc.org/assets/exam/nce_content_outline.pdf

⁴¹ OPLR Listening & Vetting Tour

⁴² Utah Division of Professional Licensing (2023). *Clinical Mental Health Counseling: Exam Information*. [online] Available at: <https://dopl.utah.gov/clinical-mental-health-counseling/exam-information/>. “Each of the following exams will need to be completed one at a time as NBCC only allows one registration in the system per candidate.”

Discussions with industry stakeholders suggest that of the two currently required exams, the NCMHCE is broadly recognized as a more robust, case-based, and competency-focused assessment, while the NCE, as a multiple choice exam, may be less beneficial and indicative of practitioner readiness. 28 other U.S. jurisdictions accept the NCMHCE, without requiring the NCE as well, while only 10 other states share Utah’s current dual-exam requirement. Requiring the NCMHCE alone in Utah would thus more broadly align the state’s regulation with national norms.

Key Considerations. Policymakers may wish to further consider whether Utah should align its exam requirements for CMHC licensure in coordination with the Counseling Compact. Utah has already implemented legislation to enable participation in the compact,⁴³ which is anticipated to begin accepting applications sometime in either 2024 or 2025.⁴⁴ The counseling compact commission recently voted to adopt the following rule on examination requirements:⁴⁵

“A. The nationally recognized exam that states must require for a Licensed Professional Counselor to be eligible to participate in the Counseling Compact is a counseling exam that is any one or more of the following:

1. The National Counselor Examination (NCE), which is currently administered by the National Board for Certified Counselors, or its successor
2. The National Clinical Mental Health Counseling Examination (NCMHCE), which is currently administered by the National Board for Certified Counselors, or its successor; or
3. The Certified Rehabilitation Counselor Exam (CRCE), which is currently administered by the Commission on Rehabilitation Counselor Certification, or its successor.”

Agency leaders expressed support for aligning with the compact and accepting any of the three exams for Utah applicants: “I think this would be a good move for Utah... Many states only require the NCE and the compact is also going to allow participation with just one of the three exams.”⁴⁶ However, because the combination of entry requirements for licensure differs from state-to-state, it is possible that compact states that accept only the NCE or CRCE exams may have additional requirements that compensate for the lack of the NCMHCE relative to Utah’s requirements (e.g., more stringent education or supervised experience). As the compact continues to develop, and in order to ensure that Utah does not maintain more burdensome entry requirements for its own licensees than for those licensees coming from out of state, additional research will be needed to confirm whether it is appropriate to continue mandating the NCMHCE for all Utah candidates, while accepting the NCE or CRCE for practitioners from other compact states.

⁴³ [UCA 58-60a](#) (Enacted by Chapter 466, 2022 General Session)

⁴⁴ Counseling Compact. (2023). *Counseling Compact*. [online] Available at: <https://counselingcompact.org/>.

⁴⁵ Counseling Compact. (2023). *Counseling Compact Commission Rules Document*. [online] Available at: <https://counselingcompact.org/wp-content/uploads/2023/11/Counseling-Compact-Rule-on-Examination-Requirements-final.pdf>

⁴⁶ OPLR Listening & Vetting Tour

Exam Requirements for Top-Level License in Clinical Mental Health Counseling							
	NCMHCE	NCE	Either		NCMHCE	NCE	Either
Alabama			✓	Nebraska			✓
Alaska			✓	Nevada	✓		
Arizona			✓	New Hampshire	✓		
Arkansas*		✓		New Jersey		✓	
California	✓			New Mexico	✓	✓	
Colorado		✓		New York	✓		
Connecticut			✓	North Carolina			✓
Delaware		✓		North Dakota			✓
Florida	✓			Ohio*	✓	✓	
Georgia		✓		Oklahoma		✓	
Hawaii		✓		Oregon			✓
Idaho*	✓	✓		Pennsylvania			
Illinois	✓	✓		Rhode Island		✓	
Indiana*	✓	✓		South Carolina			✓
Iowa			✓	South Dakota*	✓	✓	
Kansas	✓	✓		Tennessee	✓	✓	
Kentucky			✓	Texas			✓
Louisiana			✓	Utah	✓	✓	
Maine	✓	✓		Vermont	✓	✓	
Maryland		✓		Virginia	✓		
Massachusetts	✓			Washington			✓
Michigan			✓	West Virginia			✓
Minnesota	✓			Wisconsin			✓
Mississippi			✓	Wyoming			✓
Missouri		✓		District of Columbia		✓	
Montana			✓	-			

**These states do not explicitly require these exams for the highest level of licensure, but require the NCE for lower-level licenses, which are required in order to progress toward the higher-level license.*

Equivalent Field Licensure Pathway

Summary of Recommendation

Streamline and strengthen the requirements for licensure through an “equivalent field” by requiring that candidates for this pathway pass the National Counselor Examination (NCE), and by continuing to require verification of 1) graduate-level coursework in clinical diagnosis and 2) ethical practice, as well as a 3) practicum/internship. (58-60-405, R156-60c-102)

Status Quo. Currently, applicants for clinical mental health counselor (CMHC) licensure (as well as associate licensure) may evidence completion of a master’s or doctorate degree from an equivalent field (e.g., a master’s degree in psychology or a master’s degree in clinical mental health counseling that is not CACREP-accredited) in lieu of a CACREP-accredited master’s or doctorate degree in clinical mental health counseling. Administrative rule lays out criteria for establishing this equivalency, including the verification of 10 subject-matter areas that must be covered in graduate-level courses, plus a supervised practicum/internship requirement, as follows:⁴⁷

“Equivalent field,’ as used in Section 58-60-405, means that the educational program:

- (a) prepares students to practice mental health counseling through the study of generally recognized clinical mental health counseling principles, methods, and procedures;
- (b) contains three semester or four quarter credit hours of graduate level courses in the following subjects: (i) social and cultural diversity; (ii) group counseling and group work; (iii) human growth and development; (iv) career development; (v) counseling and helping relationships; (vi) substance-related and addictive disorders; (vii) assessment and testing; (viii) mental status examination and the appraisal of Diagnostic and Statistical Manual maladaptive and psychopathological behavior; (ix) research and program evaluation; and (x) professional counseling orientation and ethical practice; and
- (c) includes 700 documented hours of supervised clinical training from at least one practicum or internship, of which 240 hours consists of providing therapy directly to clients.”

Rationale. The current requirements pose a significant burden to applicants for licensure, who are wholly responsible for locating and providing course description or syllabi materials for each course that might be considered equivalent to the content areas listed above. According to DOPL staff, these materials packets are usually around 200 pages long, and it can be difficult for applicants to locate accurate course syllabi if a significant period of time has passed since the applicant’s graduation. After submitting these materials, applicants may be required to wait up to 60 days to receive a decision from the board, or longer if the board finds in the review meeting that necessary documentation is missing. While applicants’ licensure may be approved after the evaluation, some are denied licensure entirely if a certain amount of credits (about the equivalent of a full-time semester) are not determined to be equivalent, and some may be issued an intern license and allowed to practice while re-taking a smaller number of credits determined to be non-equivalent.

⁴⁷ [R156-60c-102](#)

The current regulation also places a significant administrative burden on both state administrators and board members to verify the content covered in graduate level courses. The education review process currently involves a review of the syllabus of every course the individual applicant took during their graduate degree program, to verify whether the program meets the requirements for equivalency. This process was described to OPLR as “horrible to implement” and “burdensome,”—in practice, requiring board members to review hundreds of pages of course descriptions and syllabi.⁴⁸ Board members and administrators also pointed out how the subjective nature of the education review process, particularly for subjects with less standardized course work and assignments, made these evaluations feel inconsistent across reviews, leading to the potential for unfair outcomes in the review process. Discussions with stakeholders revealed that the National Counselor Examination (NCE) is sometimes used as a summative assessment within master’s level counseling programs, and so may appropriately substitute for the verification of individual courses. The current requirement that all applicants for licensure pass both exams was implemented, in part, to accommodate for the equivalent field pathway to licensure. Thus, OPLR’s recommendations together reflect a move toward requiring this exam only for those coming through this alternate educational pathway. Stakeholders agreed that ongoing review of diagnostic and ethical practice coursework would be beneficial; the coursework in these areas tends to be less varied, making comparisons both easier and more objective. These subjects are also considered more central to the safe and competent practice of mental health therapy, making the additional step of verifying this course content worthwhile.

⁴⁸ OPLR Listening & Vetting Tour