

Maryland Counseling Association

A BRANCH OF ACA

COMPASS POINTS

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Mission

"SERVING THE COUNSELING, GUIDANCE, AND HUMAN DEVELOPMENT PROFESSIONS"

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MCA is pleased to welcome our new President

Dr. Ajita Robinson





SAVETHE DATE

2nd Annual Maryland Counselors for Social Justice (MCSJ)

CONFERENCE

April 18, 2020

*Keynote Speaker *Education Sessions *Poster Sessions *Vendors *Panel Discussions *Networking *Breakfast *Lunch *CE's



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Articles

Impact of Client Insurance Status on LGPC Practice: An Update Written by Lisa Fracica, MA,MFA,MS, LGPC, Student- PhD Mind Body Medicine program, Saybrook University

Earlier this year, I was a newly licensed graduate professional counselor (LGPC) excited to be starting a position at an outpatient mental health clinic. The staff was warm and engaging. I was given my own small office to furnish according to my taste. However, I soon had a slight disappointment. I learned that as an LGPC I was limited to seeing only Medicaid-insured clients.

While I certainly enjoy working with Medicaid clients, I feel that I'm missing out on gaining experience providing therapy to a larger variety of clients. For example, privately insured clients as a group tend to have more education, are more ethnically and racially diverse and have more diverse socioeconomic statuses. They're also more likely to have the financial means to take part in extra-therapy activities that are beneficial to their mental health. These might include a client with PTSD attending yoga classes to decrease their ongoing level of physiologic arousal or an urban dwelling client traveling outside of the city to reduce their anxiety through immersion in nature. The Medicaid clients I see could also potentially benefit from these and other activities but usually don't have the financial means to do so. It's sometimes frustrating to not be able to suggest such adjunctive activities to these clients.

Just as being able to see privately insured clients could expand the experience base of LGPCs, we would benefit from being able to see Medicare clients. This would provide opportunities to explore some of the unique mental health issues sometimes encountered by older clients. This applies to LCPCs, as well, since even independently licensed clinicians cannot currently bill Medicare for services.

The good news here is that the American Counseling Association is actively advocating for licensed counselors to be able to provide services to Medicare insured clients. Perhaps we will see new legislation passed in the future that will recognize our ability to provide excellent mental health care to Medicare clients. Even better news is that a bill pertaining to LGPCs and private insurers was passed by the state of Maryland in May. This law prohibits an insurance carrier from rejecting LGPCs providing services in an accredited mental health program. The law also applies to LGSWs, LMSWs, LGMFTs, LGADCs and LGPATs. It takes effect on October 1, 2019. Therefore, we can look forward to providing services to a broader range of clients soon.

Finally, thanks are due to the legislator who introduced this bill. On behalf of the licensed graduate clinicians impacted by it, I would like to thank Delegate Jefferson L. Ghrist of the House of Delegates for proposing and facilitating the passage of this legislation.

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- Support and advocacy for professional counseling in the state of Maryland
- Electronic reminders to renew your membership
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To register for MCA or any of our events, please go to www.mdcounseling.org

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Contact the MCA President for more information about committees and open board positions.

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