## State Board of Social Workers, Marriage and Family Therapists, and Professional Counselors March 8, 2022

## BOARD MEMBERS:

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Joy E. Corby, Ph.D., LMFT, Chair Arion R. Claggett, Acting Commissioner, Bureau of Professional and Occupational Affairs Michelle Santiago, Psy.D., LPC, Vice Chair Eric DeCriscio, MA, LPC, ACS 14 Kimberly Early, LSW 15 Erika Evans, Ph.D., LMFT - Absent 16 Christian Jordal, Ph.D., LMFT 17 Linda A. Martin, LCSW, RN 18 Cindy Moyer, LCSW 19 Marilyn L. Painter, Public Member Mayte Redcay, LCSW, LCADC, SAP, CEAP

## BUREAU PERSONNEL:

Carolyn DeLaurentis, Deputy Chief Counsel, Prosecution Division Jaime D. Black, Esquire, Board/Regulatory Counsel Steven A. Mimm, Esquire, Office of General Counsel Nathan C. Giunta, Esquire, Board Prosecution Liaison Kelsey Ashworth, Esquire, Board Prosecutor J. Karl Geschwindt, Esquire, Board Prosecutor Sarah E. McNeill, Board Administrator Lisa M. Burns, Division Chief for Health Licensing, Bureau of Professional and Occupational Affairs

## ALSO PRESENT:

Johanna Byrd, ACSW, IOM, CAE, Executive Director, National Association of Social Workers, Pennsylvania Chapter Katie Merritt, LSW, Director of Policy and Planning, Pennsylvania Insurance Department David Buono, Deputy Insurance Commissioner, Office of Market Regulation, Pennsylvania Insurance Department Sandy Ykema, Esquire, J.D., Senior Health Insurance Counsel, Pennsylvania Insurance Department Amber Garbinski

3 \* \* \* 1 State Board of Social Workers, 2 3 Marriage and Family Therapists and Professional Counselors 4 5 March 8, 2022 \* \* \* 6 7 [Pursuant to Section 708(a)(5) of the Sunshine Act, at 9:00 a.m., the Board entered Executive Session with Jaime D. Black, Esquire, Board Counsel, for the 10 purpose of conducting quasi-judicial deliberations on 11 a number of matters before the Board this date and to 12 receive advice of counsel. The Board entered public session at 11:00 a.m.l 13 \* \* \* 14 15 The regularly scheduled meeting of the State 16 Board of Social Workers, Marriage and Family 17 Therapists, and Professional Counselors was held on 18 Tuesday, March 8, 2022. Joy E. Corby, Ph.D., LMFT, 19 Chair, called the meeting to order at 11:27 a.m. 20 \* \* \* 21 Introduction of Board Members 22 [Chair Corby requested an introduction of Board 2.3 members.] 24 25 [Jaime D. Black, Esquire, Board Counsel, informed

Board members that she is leaving the Department of 1 2 State and announced Steven Mimm would be replacing her 3 as Board Counsel. \* \* \* 4 5 [Chair Corby reminded everyone that the meeting was 6 being recorded, and those who continued to participate were giving their consent to be recorded. Chair Corby also reminded everyone to keep their microphones muted unless they need to speak.] \* \* \* 10 11 Approval of minutes of the January 11, 2022 regulatory meeting/January 25, 2022 Board meeting 12 CHAIR CORBY: 1.3 I believe that the Board sent 14 15 corrections to the Board administrator 16 for the regulatory meeting minutes of 17 January 11 and January 25 regular Board 18 meeting. 19 I would ask for a motion to accept 20 the minutes with the corrections. 21 DR. JORDAL: 2.2 So moved. 2.3 CHAIR CORBY: 2.4 Do I hear a second? 25 DR. SANTIAGO:

5 Second. 1 2 CHAIR CORBY: 3 All in favor, raise your hand. Opposed? 4 Abstentions? 5 [The motion carried unanimously.] \* \* \* 6 Report of Board Prosecutorial Division [Nathan C. Giunta, Esquire, Board Prosecution Liaison, congratulated Ms. Black on her next adventure and Mr. 10 Mimm on his new adventure. 11 Mr. Giunta introduced Kelsey Ashworth as a new 12 Board prosecuting attorney. 13 Mr. Giunta presented the Consent Agreements for Case No. 21-69-014883 and Case No. 21-69-020059. 14 15 16 [J. Karl Geschwindt, Esquire, Board Prosecutor, 17 presented the Consent Agreement for Case No. 17-69-03025.1 18 \* \* \* 19 20 Appointment - Prosecution Division Annual Report 21 Presentation 22 [Carolyn A. DeLaurentis, Esquire, Deputy Chief 23 Counsel, Prosecution Division, welcomed new Board 24 members. She provided a summary of the prosecution

division's caseload during 2021.

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Ms. DeLaurentis informed the Board that 587 cases were opened in 2021, which is an increase from 2020 at 307 for the State Board of Social Workers, Marriage and Family Therapists, and Professional Counselors. She reported closing 498 cases in 2021 and 234 cases in 2020.

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Ms. DeLaurentis noted 390 cases remained open for the Board as of January 1, 2022, which could be spanning different years and could be in various stages.

Ms. DeLaurentis discussed enforcement actions, noting 18 cases resulted in discipline in 2021 with 12 fines, 3 suspensions, 3 reprimands, 5 revocations or voluntary surrenders, and 5 probationary cases. She also reported 68 warning letters in 2021, which was up from 32 in 2020.

Dr. Santiago requested a breakdown of how many social workers, LMFTs, and professional counselors there are across Pennsylvania. She also requested a breakdown of the total number of cases from 2021 by license.

Ms. DeLaurentis offered to provide the information by license type to Board Counsel. She informed Dr. Santiago of an annual report containing a breakdown of complaint categories and the number of

licensees would be sent to the General Assembly and made available publicly once it is completed.

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Dr. Jordal requested more information concerning the increase in the overall numbers year to date.

Mr. Giunta explained that there is usually an increase during renewal years. He also mentioned the numbers across other boards when everything was through telemedicine during COVID had a slowdown in the numbers as far as how business and therapy counseling was being conducted, which led to not as many complaints during that period. He noted there would be an influx when things get back to normal.

Ms. DeLaurentis addressed COVID-19 cases, noting one complaint may result in more than one case being opened. She reported 1,223 cases were opened regarding COVID complaints in 2020 with 3 of those cases for the State Board of Social Workers, Marriage and Family Therapists, and Professional Counselors. She reported a significant decrease in COVID-related complaints in 2021, mostly for business-related boards, but an increase in healthcare-related boards with 543 COVID-related cases and 7 of those for this Board.

Ms. DeLaurentis addressed the prosecutorial division numbers, noting the total case count does not

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1 | include charities, corporations, or the Pennsylvania

2 | State Athletic Commission. She noted a record number

3 of cases opened last year and thanked the

4 administrative assistants for processing so many

5 files. She reported 18,363 cases were opened in 2021,

6 which is an increase from 2020 at 13,394.

Ms. DeLaurentis reported 15,994 cases were closed in 2021 and 13,274 in 2020. She thanked the Board, prosecution, and Board Counsel for their collaborative effort. She noted 15,141 open cases as of January 1,

Ms. DeLaurentis offered to return to the Board to answer any prosecution questions the Board may have throughout the year.]

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16 Appointment - Pennsylvania Insurance Department - No

17 Surprises Act

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2022.

18 | [Katie Merritt, LSW, Director of Policy and Planning

19 | Pennsylvania Insurance Department (PID), informed

20 everyone that the No Surprises Act went into effect on

21 January 1, 2022. She stated Governor Wolf charged the

22 Pennsylvania Insurance Department with being the lead

23 agency in implementing the act.

David Buono, Deputy Insurance Commissioner,

25 Office of Market Regulation, Pennsylvania Insurance

Department, informed the Board that material presented was prepared by the Commonwealth of Pennsylvania

Insurance Department based on the law, regulations, and guidance as of December 1, 2021.

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Mr. Buono addressed the No Surprises Act (NSA), noting that the disclosure requirement applies to all health care providers, the provider directory requirement applies to all healthcare providers applicable only to providers in-network for major medical insurance policies, and the Good Faith Estimate requirement applies to all health care providers.

Mr. Buono commented that health plans covering any benefits for emergency services, including air ambulance, under the No Surprises Act, requires emergency services to be covered without any prior authorization regardless of whether a provider or facility is in-network.

Mr. Buono also commented that the No Surprises
Act requires patients with little or no control over
who provides their care to be protected when health
plans cover any benefits for nonemergency services
related to a visit in an in-network facility.

Mr. Buono stated ancillary providers, such as labs or doctors, involved in a surgery that the

patient does not select may not balance bill. noted cost-sharing for ancillary providers is treated as in-network. He commented that the No Surprises Act protects people from unexpected bills for emergency services, air ambulance services, and certain nonemergency services related to a visit to a facility. He mentioned that emergency ground ambulance services are not included and deferred to further study at the federal level.

Mr. Buono stated No Surprises Act billing protection applies if coverage is through an employer, state-based marketplace Pennie, or directly through an individual market health insurance company. He mentioned that the act does not apply to Medicare, Medicaid, Indian Health Services, Veterans Affairs, or TRICARE.

Mr. Buono addressed plans that do not have the balance billing protection, including indemnity or accepted benefit plan enrollees, because it is not individual market coverage and does not typically have a network. He noted short-term limited duration plan enrollees, health care sharing ministries, the Amish, or uninsured are not individual market coverage.

Mr. Buono addressed uninsured individuals noting providers are required to provide a Good Faith

Estimate upon request or when scheduling an item or service. He stated uninsured and self-pay patients must receive a Good Faith Estimate at least 72 hours before services.

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Mr. Buono also noted that a Good Faith Estimate must be given at least 3 hours ahead of time if a service is scheduled within three days. He noted the act does require that a Good Faith Estimate be provided to a patient's plan in advance of service but stated the federal government and Pennsylvania is taking a non-enforcement approach to this provision due to the technological challenges affecting this provision.

Mr. Buono stated providers are encouraged to coordinate with co-providers to present a single Good Faith Estimate, but the Department of Health and Human Services (HHS) is exercising enforcement discretion and flexibility to allow for technological coordination.

Mr. Buono provided a summary of providers who may not balance bill. He stated providers and facilities must have a business process to give provider directory and network information to plans anytime there is a material change. He commented that providers and facilities may, by contract, impose on

plans the duty to keep the directory current in the
event of contract termination. He noted that the
provider or facility must reimburse the patient plus
interest if a provider or facility bills a patient
more than the in-network cost-sharing amount and the
patient pays the bill.

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Mr. Buono addressed continuity of care, where a contract with a plan terminates and the provider or facility is no longer in-network and the patient is a continuing care patient, the provider or facility must accept payment, including cost-sharing calculated on an in-network basis for the duration of the continuity of care.

Mr. Buono stated providers with complaints about a plan should contact the Pennsylvania Insurance Department because this department has a process to quickly review the complaint. He mentioned HHS is also establishing a complaint process with the acknowledgement of the complaint possibly taking 60 days. He mentioned that providers with complaints about a patient should first make sure the patient understands the act and are encouraged to contact the Pennsylvania Insurance Department.

Mr. Buono noted that patients who do understand the act should be handled as before with the

1 understanding in the case of a surprise medical bill 2 that the provider may not collect more than the in-3 network cost-sharing.

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Ms. Ykema addressed disclosure requirements, noting a one-page disclosure notice must be available to patients with the requirements and prohibitions regarding balance billing and must identify how a patient may contact the appropriate state and federal agencies if the patient believes the provider or facility violated the requirements of the law.

Ms. Ykema stated the information must be publicly available from the provider and facility as well as being posted. She mentioned the Pennsylvania Insurance Department has a model notice and information on their website, along with the federal government website at www.cms.gov/nosurprises containing NSA information.

Ms. Ykema addressed notice and consent, which allows a provider to balance bill if notice is given and a written consent is received from the patient at least 3 days before the service, not later than 1 business day after scheduling, or 3 business days in advance if the service is scheduled 10 days in advance. She noted it may not be used in an emergency. She explained that the notice and consent

have to be on a separate form, signed, retained for seven years, and a copy given to the patient.

Ms. Ykema explained that the notice and consent must provide notice that the provider does not participate in the consumer's health insurance plan, have a Good Faith Estimate amount that the provider may charge for all of the services, explain that there may need to be prior authorization or other approval, and be clear that a person does not have to consent to an out-of-network provider.

Ms. Ykema emphasized that a person must be able to obtain services from an available in-network provider, but if there is no available in-network provider, then notice and consent may not be used to allow the provider to balance bill.

Ms. Ykema addressed payment, where the provider will need to confirm the patient's coverage. She explained that an out-of-network provider who furnished a surprise medical service may collect cost-sharing from the patient at the in-network level and then the provider may bill the patient's plan directly for all remaining charges.

Ms. Ykema noted a provider and plan may negotiate if the provider is not satisfied with the amount directly through a federally administered Independent

Dispute Resolution process. She mentioned there is litigation on the qualifying payment amount and the Independent Dispute Resolution process at the federal

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- Ms. Ykema addressed disputes with uninsured and self-pay individuals, where the provider may bill the patient. She stated the patient may access the Patient-Provider Dispute Resolution process if there is a difference in the Good Faith Estimate of at least \$400. She noted that the patient must start the process within 120 days and pay a small administrative fee to start the process but will recoup it if the patient prevails.
  - Ms. Ykema addressed enforcement, noting that the Pennsylvania Insurance Department had been tasked with coordinating implementation and enforcement with all the state agencies and facilities, including the Department of State, Department of Health, and Department of Drug and Alcohol Programs.
  - Ms. Ykema noted that the state law applies unless it prevents the application of the federal law. She mentioned the Pennsylvania Insurance Department has laws to regulate insurers to deal with professional conduct and licensure. The Department of State, Department of Health, and Drug and Alcohol Programs

will use both professional conduct and licensure laws.

She explained that state agencies that receive a call

related to balance billing and the No Surprises Act

can go to the Pennsylvania Insurance Department's

website for guidance.

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Ms. Ykema stated complaints are assigned to a consumer services representative after a complaint is received for tracking to identify issues in educational opportunities and enforcement needs. She noted the consumer services representative works with the patient, provider, or health plan and with other state agencies and collaborates with the federal agency if the issue cannot be addressed.

Ms. Ykema noted the Department of Health and Human Services has oversight over the insurance plans, providers, and facilities; Department of Labor has oversight over self-funded plans; and the Office of Personnel Management has oversight over the Federal Employees Health Benefits (FEHB) program. She stated Pennsylvania Insurance Department is prepared to enter into collaborative enforcement agreements with any of those agencies as needed to address concerns.

Ms. Ykema encouraged everyone to visit the Pennsylvania Insurance Department at www.insurance.pa.gov/nosurprises for further

information.

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Ms. Martin stated the No Surprises Act is confusing and requested more information concerning self-employed therapists in private practice and their requirements as far as in-network and out-of-network insurance plans and Medicare and Medicaid.

Ms. Ykema explained that the disclosure notice and provider directory is good practice for everybody. She stated Medicare and Medicaid have their own balance billing laws, and therapists would need to look at what Medicare and Medicaid say about balance billing. She noted therapists would want to have the disclosure notice and the Good Faith Estimate of what the services would be for insured and uninsured patients.

Ms. Martin also asked for clarification regarding the provider directory component and whether she is required to do anything else as a provider who gives information to in-network insurance companies.

Ms. Ykema explained that anyone in-network should be listed in the insurance plan's directory of all the providers in-network so the patient can see the provider is in the network. She noted to make sure the insurance company has an up-to-date directory.

Ms. Martin asked whether not available or to be

determined could be put on the form under diagnosis when a provider does not have a diagnosis yet. She also asked for clarification as to whether she would need signed consent.

2.4

Ms. Ykema noted the question had been raised to HSS, particularly in the mental health arena, where it may take an initial visit to identify what the issue is to be able to give the Good Faith Estimate. She stated the initial Good Faith Estimate is going to be for a first visit to assess the situation.

Ms. Ykema explained that the notice and consent requirement is for non-emergency services in connection with a visit to a facility, and the notice and consent is not applicable for providers dealing with a patient in the office.

Ms. Ykema further explained the notice and consent provision is not applicable for providers in an office; but the disclosure requirement, Good Faith Estimate, and provider directory requirements are all applicable.

Dr. Jordal requested confirmation on the disclosure for individuals who are out-of-network and working in private practice, where disclosure is their rates and amount of time for assessment and treatment on average, but if a client is self-submitting to

1 their own insurance company for coverage, the notice

- 2 from the practitioner or provider does not need to
- 3 include any type of estimate of the level of
- 4 reimbursement the client would be getting from their
- 5 insurance provider.
- 6 Ms. Ykema commented that the Good Faith Estimate
- 7 | will apply in time whether the individual is uninsured
- 8 or self-pay or insured. She explained that
- 9 individuals not identifying their insurance to a
- 10 provider and is self-pay is treated as an uninsured
- 11 individual. She noted a provider would be able to
- 12 submit to the insurance plan whether it is in-network
- 13 or out-of-network.
- 14 Ms. Merritt encouraged Board members to submit
- 15 any questions to Board Counsel or the policy office.
- 16 Chair Corby thanked the Pennsylvania Insurance
- 17 Department for their presentation.]
- 18
- 19 Adoption of the Agenda
- 20 CHAIR CORBY:
- 21 Motion to adopt this agenda. Would
- 22 somebody say so moved and second it?
- 23 DR. JORDAL:
- 24 So moved.
- 25 DR. SANTIAGO:

20 1 Second. 2 CHAIR CORBY: 3 All in favor, raise your hand. 4 [The motion carried unanimously.] \* \* \* 5 6 Report of Board Counsel 7 MS. BLACK: Pursuant to Section 708(a)(5) of the 9 Sunshine Act, prior to today's meeting, 10 the Board entered Executive Session for the purpose of conducting quasi-judicial 11 deliberations on a number of matters 12 1.3 currently pending before the Board and 14 to receive the advice of counsel; 15 specifically, for items 2 through 6 and 16 12 through 24. I believe the Board would entertain 17 18 a motion to approve the Consent 19 Agreement at item 3, Case No. 21-69-20 014883. 21 DR. JORDAL: 22 So moved. 2.3 MS. PAINTER: 24 Second. 25 CHAIR CORBY:

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                  All in favor, raise your hand. Opposed?
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                  Are there any abstentions? Recused?
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   [The motion carried. Michelle Santiago and Eric
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   DeCriscio opposed the motion. Item 3 at Case No. 21-
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   69-014883 is BPOA v. Darla Marie Cherrick, LCSW.]
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   MS. BLACK:
                  I believe the Board would entertain a
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                  motion to approve the VRP Agreement at
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                  item 4, Case No. 21-69-020059.
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   MS. PAINTER:
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                  So moved.
   DR. SANTIAGO:
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                  Second.
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   CHAIR CORBY:
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                  All those in favor, raise your hand.
                  Opposed? Abstentions? Recused?
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   [The motion carried unanimously.]
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   MS. BLACK:
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                  I believe the Board would entertain a
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                  motion to accept the Consent Agreement
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                  at item 5, Case No. 17-69-03025.
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   MS. PAINTER:
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                  So moved.
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22 1 MS. EARLY: 2 Second. 3 CHAIR CORBY: 4 All those in favor, raise your hand. 5 All those opposed, raise your hand. Abstentions? Recused? 6 [The motion carried. Joy Corby, Christian Jordal, and Michelle Santiago opposed the motion. Item 5 at Case No. 17-69-03025 is BPOA v. Pamela Davis, LCSW.] \* \* \* 10 11 Report of Board Counsel - Matters for Hearing or 12 Delegation MS. BLACK: 13 14 Moving on to item 6, I believe the Board 15 would entertain a motion to delegate to 16 the Office of Hearing Examiners, Case 17 No. 20-69-012585, Danielle M. Leach, 18 LSW. 19 DR. JORDAL: 20 So moved. 21 MS. PAINTER: 22 Second. 2.3 CHAIR CORBY: 2.4 All those in favor, raise your hand. 25 Opposed? Abstentions? Recused?

1 [The motion carried. Michelle Santiago abstained from 2 voting on the motion. Linda Martin recused herself 3 from deliberations and voting on the motion.]

\* \* \*

Report of Board Counsel - Miscellaneous
[Jaime D. Black, Esquire, Board Counsel, provided a
PowerPoint presentation of Sunshine Act guidelines for
the Board's review. She noted the Sunshine Act was
amended last summer through Act 65, where agencies
must make meeting agendas public within 24 hours of a
meeting, official action is prohibited on any item not
on the agenda without first being amended during that
meeting, and the Board cannot spend money without it
being first approved at a public meeting.

Ms. Black addressed Recusal Guidelines. She informed Board members that mandatory recusals would be when a member has some sort of prosecutorial role in a matter or direct personal or financial interest in the outcome.

Ms. Black stated strongly suggested recusals would include a personal affection for someone directly involved in the issue. She noted that merely knowing a person or knowing of a person who is involved in a pending matter is not enough to warrant a recusal. She also noted strongly suggested recusals

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would include having knowledge from outside of a case that cannot be set aside in order to make a fair and unbiased determination.
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Ms. Black noted discretionary recusals to include a Board member not being able to hear and dispose of a case or participate in a decision on a subject fairly and without prejudice.

Ms. Black encouraged Board members to contact
Board Counsel prior to a meeting if they are uncertain
whether a recusal is appropriate.]

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12 Review of Applications

13 MS. BLACK:

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I believe the Board would entertain a

motion to provisionally deny the

16 Application for Professional Counselor

by Exam for Chelsea Ackerman.

18 DR. SANTIAGO:

19 Motion.

20 DR. JORDAL:

21 Second.

22 CHAIR CORBY:

23 All those in favor, raise your hand.

24 Opposed? Abstentions? Recused?

25 [The motion carried. Michelle Santiago opposed the

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   motion.]
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   MS. BLACK:
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                  I believe the Board would entertain a
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                  motion to provisionally deny the
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                  Application at item 13, Professional
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                  Counselor by Examination for Mary Epps.
   DR. SANTIAGO:
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                  Motion.
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   MS. MOYER:
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                  Second.
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   CHAIR CORBY:
                  All those in favor, raise your hand.
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                  Opposed? Abstentions? Recused?
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   [The motion carried. Marilyn Painter opposed the
   motion. Christian Jordal recused himself from
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   deliberations and voting on the motion.]
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   MS. BLACK:
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                  I believe the Board would entertain a
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                  motion to approve the Application at
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                  item 14, Professional Counselor by Exam
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                  for Maria Huber.
2.4
   MS. PAINTER:
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                  So moved.
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   DR. SANTIAGO:
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                  Second.
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   CHAIR CORBY:
                  All those in favor, raise your hand.
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                  Opposed? Abstentions?
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   [The motion carried unanimously.]
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   Review of Applications - Act 41 Review
   MS. BLACK:
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                  Regarding item 15, I believe the Board
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                  would entertain a motion to approve the
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                  Act 41 Application for Clinical Social
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                  Worker by Endorsement under Act 41 for
14
                  Michael Byck.
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   DR JORDAL:
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                  So moved.
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   DR. SANTIAGO:
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                  Second.
19
   CHAIR CORBY:
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                  All in favor, raise your hand. Opposed?
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                  Abstentions?
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   [The motion carried unanimously.]
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   MS. BLACK:
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                   I believe the Board would entertain a
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27 motion to approve the Act 41 1 2 Applications for item 16, Professional 3 Counselor of Kelsea Pelletier; item 17, Professional Counselor of Malika Brown-4 5 Crosby; item 18, Professional Counselor 6 of Manuella Lalwani; item 19, Professional Counselor of Shanell Sotilleo; and item 20, Professional 9 Counselor of Susan Cahill. 10 MS. PAINTER: 11 So moved. 12 DR. SANTIAGO: Second. 13 CHAIR CORBY: 14 15 All in favor, raise your hand. Opposed? Abstentions? Recused? 16 17 [The motion carried unanimously.] \* \* \* 18 19 MS. BLACK: 20 I believe the Board would entertain a 2.1 motion to approve the Act 41 Application 22 for item 21, Marriage and Family 2.3 Therapist of Kathleen Scheppe. 2.4 DR. JORDAL: 25 So moved.

28 1 MS. PAINTER: 2 Second. 3 CHAIR CORBY: All in favor, raise your hand. Opposed? 4 5 Abstentions? Recused? [The motion carried unanimously.] 6 \* \* \* MS. BLACK: Item 22 are Act 41 Provisional Orders 10 that were already issued to the 11 applications, so ratification is 12 required. 13 I believe the Board would entertain 14 a motion to Ratify the Approval of the 15 Act 41 Provisional Orders for Morgan 16 Oakes, Professional Counselor; Anthony 17 Boyd, Professional Counselor; and Brandon McQueen, Marriage and Family 18 19 Therapist. 20 MS. PAINTER: 21 So moved. 22 DR. JORDAL: 2.3 Second. 2.4 CHAIR CORBY: 25 All in favor, raise your hand. Opposed?

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29
                  Abstentions? Recused?
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   [The motion carried unanimously.]
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   Review of Applications - Corporate/Fictitious Name
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5
     Approval
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   MS. BLACK:
                  I believe the Board would entertain a
                  motion to approve the
                  Corporate/Fictitious Name for item 23,
10
                  Hilary Burcell, LCSW, Integrative
11
                  Psychotherapy and Wellness LLC.
   MS. MOYER:
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13
                  So moved.
   CHAIR CORBY:
14
15
                  Do I hear a second?
   DR. SANTIAGO:
16
17
                  Second.
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   CHAIR CORBY:
19
                  All in favor, raise your hand. Opposed?
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                  Abstentions? Recused?
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   [The motion carried unanimously.]
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23
   Correspondence
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   MS. BLACK:
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                  I believe the Board would entertain a
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1 motion to approve the Request for

2 Special Accommodations to take the NCE

3 Examination for <u>Kierstyn Gunn</u> at item

24.

5 MS. PAINTER:

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6 So moved.

7 MS. EARLY:

8 Second.

9 CHAIR CORBY:

10 All in favor, raise your hand. Opposed?

Abstentions? Recused?

12 [The motion carried. Christian Jordal opposed the

13 motion. Michelle Santiago abstained from voting on

14 | the motion.]

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16 Report of Acting Commissioner

17 | [Arion R. Claggett, Acting Commissioner, Bureau of

18 | Professional and Occupational Affairs, informed

19 everyone that all Board meetings moving forward will

20 be held in a hybrid format providing the option of

21 attending virtually through a Microsoft Teams platform

22 | instead of Webex or in person. He also noted that he

23 and Ms. McNeill would be attending all Board meetings

24 in person.

25 Acting Commissioner Claggett addressed Board

- 1 | member questions and stated member would not have to
- 2 | notify anyone as to whether their attendance would be
- 3 | in person or virtually, except for travel
- 4 requirements, but members are still required to notify
- 5 | the Board administrator if not attending the meeting
- 6 either virtually or in person.
- Acting Commissioner Claggett explained that
- 8 Microsoft Teams would be similar to Webex, and the
- 9 invitation and link would be provided to everyone.
- 10 | Chair Corby requested clarification as to whether
- 11 the legislature or somebody has decided that in person
- 12 also includes virtual.
- 13 Acting Commissioner Claggett noted it to be part
- 14 of Act 100, and Chair Corby requested more information
- 15 regarding Act 100.
- 16 Ms. Black explained Act 100 provided virtual
- 17 options and believed it was on a prior agenda but
- 18 offered to send that information to everyone.
- 19 Acting Commissioner Claggett also addressed Owl
- 20 technology, noting the state does not have the
- 21 capability of offering that technology at the current
- 22 | time at Penn Center and would be communicating through
- 23 a Polycom intercom.
- 24 Acting Commissioner Claggett discussed polling
- 25 | Board members before the meetings to see who would be

1 | attending in person.]

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3 Report of Board Administrator - Amended 2023 Board

4 Meeting Dates

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5 | [Sarah E. McNeill, Board Administrator, requested

6 approval of amended 2023 Board meeting dates.]

7 DR. SANTIAGO:

8 I make a motion that we approve the

9 proposed dates for the 2023 Board

10 meetings.

11 MS. PAINTER:

12 Second.

13 CHAIR CORBY:

14 All in favor, raise your hand. Opposed?

15 Abstentions?

16 [The motion carried unanimously.]

17

18 Report of Board Administrator - Executive Session

19 | Start Time Discussion

20 [Sarah E. McNeill, Board Administrator, asked the

21 Board whether it wished to make Executive Session from

 $22 \mid 9:00$  a.m. to 11:00 a.m. a permanent change.

23 Ms. Black noted prior discussion last year, where

24 Board members decided to keep Executive Session at

25 9:00 a.m. instead of 9:30 a.m. through March 2022 and

1 revisit the matter later, because it enables the Board

2 to get through the agenda without having to go too

- 3 late into public session.
- 4 Dr. Jordal suggested collecting more data because
- 5 starting half an hour earlier can require a person to
- 6 stay overnight and would cost more for the Board and
- 7 state.
- 8 Ms. Black commented that the Board could keep the
- 9 time at 9:00 and revisit the issue if necessary.]
- 10 DR. JORDAL:
- 11 So moved.
- 12 DR. SANTIAGO:
- 13 Second.
- 14 CHAIR CORBY:
- All in favor, raise your hand. Opposed?
- 16 Abstentions?
- 17 [The motion carried unanimously.]
- 18
- 19 Miscellaneous
- 20 [Joy E. Corby, Ph.D., LMFT, Chair, referred to the
- 21 Department of Health correspondence regarding the
- 22 | Pennsylvania Donor Family Grief Counseling Program and
- 23 Training.
- Ms. McNeil noted an email blast was sent to all
- 25 active licensees in Pennsylvania.]

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1
2
   Adjournment
3
   CHAIR CORBY:
                  Since there are no other items on our
 4
5
                  agenda, I believe that I am open for a
6
                  motion to adjourn the meeting.
7
   DR. SANTIAGO:
                  I make a motion we conclude the meeting.
9
   DR. JORDAL:
10
                  Second.
   CHAIR CORBY:
11
12
                  All in favor, raise your hand. Opposed?
13
                  Abstentions?
14
   [The motion carried unanimously.]
15
16
   [There being no further business, the State Board of
17
   Social Workers, Marriage and Family Therapists, and
18
   Professional Counselors Meeting adjourned at
19
   12:59 p.m.]
20
                               * * *
21
22
23
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25
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I hereby certify that the foregoing summary minutes of the State Board of Social Workers, Marriage and Family Therapists and Professional Counselors meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Social Workers, Marriage and Family Therapists and Professional Counselors meeting.

CERTIFICATE

Amber Garbinski,

Minute Clerk

Sargent's Court Reporting
Service, Inc.

STATE	BOARD	OF SO	CIAL	WORKERS	,
MARRIA	GE AND	FAMI	LY TH	ERAPISTS	3,
AND	PROFES	SIONA	L COU	NSELORS	
	REFE	RENCE	INDE	X	

 March 8, 2022

8		
9 10	TIME	AGENDA
11 12 13	9:00 11:00	Executive Session Return to Open Session
13 14 15	11:27	Official Call to Order
16 17	11:27	Introduction of Board Members
18 19	11:30	Approval of Minutes
20 21	11:31	Report of Prosecutorial Division
22 23 24 25 26	11:43	Appointment - Carolyn A. DeLaurentis, Esquire, Deputy Chief Counsel, Prosecution Division Annual Report Presentation
27 28 29	11:56	Appointment - Pennsylvania Insurance Department Presentation
30 31	12:32	Adoption of Agenda
32	12:34	Report of Board Counsel
33 34	12:40	Review of Applications
35 36 37	12:44	Correspondence
38	12 <b>:</b> 45	Report of Acting Commissioner
39 40	12 <b>:</b> 53	Report of Board Administrator
41 42	12 <b>:</b> 58	Miscellaneous
43 44 45 46 47	12:59	Adjournment