



**WEST VIRGINIA  
SECRETARY OF STATE**

**NATALIE E. TENNANT**

**ADMINISTRATIVE LAW DIVISION**

**cFILED**

**8/26/2016 4:36:55 PM**

OFFICE OF  
WEST VIRGINIA SECRETARY OF STATE

**FORM 3 -- NOTICE OF AGENCY APPROVAL OF A PROPOSED RULE AND FILING WITH THE  
LEGISLATIVE RULE-MAKING REVIEW COMMITTEE**

**AGENCY**      **Counseling**

**RULE TYPE**    **Legislative**                      **AMENDMENT TO EXISTING RULE**    **Yes**    **TITLE-SERIES**    **27-09**

**RULE NAME**    **Marriage and Family Therapist Fees**

**CITE AUTHORITY**    **30-31**

THE ABOVE PROPOSED LEGISLATIVE RULE HAVING GONE TO A PUBLIC HEARING OR A PUBLIC COMMENT PERIOD IS HEREBY APPROVED BY THE PROMULGATING AGENCY FOR FILING WITH THE SECRETARY OF STATE AND THE LEGISLATIVE RULE-MAKING REVIEW COMMITTEE FOR THEIR REVIEW.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**

**Roxanne E Clay -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 27-09



Rule Id: 10260



Document: 28928



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 1)**

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**PRIMARY CONTACT**

Roxanne Clay  
815 Quarrier Street

Charleston, STATE ZIP

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**AUTHORIZING STATUTE(S) CITATION**

**30-31**

**DATE FILED IN STATE REGISTER WITH NOTICE OF HEARING OR PUBLIC COMMENT PERIOD**

**Tuesday, July 26, 2016**

**WHAT OTHER NOTICE, INCLUDING ADVERTISING, DID YOU GIVE OF THE HEARING?**

**Public Comment Period-** Email notices to all licensees were sent out and all proposed rule changes were posted on WVBE's website on 7/26/2016. Email notices were also sent to the chair and/or president of the WV Counseling Association (WVCA), the WV Licensed Professional Counselor Association (WVLPCA), WVU and MU Counseling Departments.

**DATE OF PUBLIC HEARING(S) OR PUBLIC COMMENT PERIOD ENDED**

**Thursday, August 25, 2016**

**Roxanne E Clay -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 2)**

**AGENCY**      **Counseling**

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**RULE NAME**    **Marriage and Family Therapist Fees**

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**ATTACH LIST OF PERSONS WHO APPEARED AT HEARING, COMMENTS RECEIVED,  
AMENDMENTS, REASONS FOR AMENDMENTS.**

**Attached**

**DATE YOU FILED IN STATE REGISTER THE AGENCY APPROVED PROPOSED LEGISLATIVE RULE  
FOLLOWING PUBLIC HEARING: (BE EXACT)**

**Friday, August 26, 2016**

**Roxanne E Clay -- By my signature, I certify that I am the person authorized to file legislative rules, in  
accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 3)**

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IF THE STATUTE UNDER WHICH YOU PROMULGATED THE SUBMITTED RULES REQUIRES CERTAIN FINDINGS AND DETERMINATIONS TO BE MADE AS A CONDITION PRECEDENT TO THE PROMULGATION. GIVE THE DATE UPON WHICH YOU FILED IN THE STATE REGISTER A NOTICE OF THE TIME AND PLACE OF A HEARING FOR THE TAKING OF EVIDENCE AND A GENERAL DESCRIPTION OF THE ISSUES TO BE DECIDED.

**Roxanne E Clay -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 4)**

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**CITE AUTHORITY**    **30-31**

**DATE OF HEARING OR COMMENT PERIOD**

**ON WHAT DATE DID YOU FILE IN THE STATE REGISTER THE FINDINGS AND DETERMINATIONS  
REQUIRED TOGETHER WITH THE REASONS THEREFOR?**

**ATTACH FINDINGS AND DETERMINATIONS AND REASONS**

**None**

**BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.**

**Yes**

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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 1)**

**AGENCY**      **Counseling**

**RULE TYPE**    **Legislative**                      **AMENDMENT TO EXISTING RULE**    **Yes**    **TITLE-SERIES**    **27-09**

**RULE NAME**    **Marriage and Family Therapist Fees**

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**PRIMARY CONTACT**

Roxanne Clay  
815 Quarrier Street

Charleston, STATE ZIP

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**AGENCY      Counseling**

**RULE TYPE    Legislative                      AMENDMENT TO EXISTING RULE    Yes    TITLE-SERIES    27-09**

**RULE NAME   Marriage and Family Therapist Fees**

**CITE AUTHORITY   30-31**

**SUMMARIZE IN A CLEAR AND CONCISE MANNER WHAT IMPACT THIS MEASURE WILL HAVE ON COSTS AND REVENUES OF STATE GOVERNMENT.**

**Since WVBECE is a non-appropriated board, all fees are collected from licensees, applicants and sponsors of continuing education. Therefore, there is no cost to state government.**

**Since WVBECE is a non-appropriated board, all revenues are used for the board's operating costs, therefore, there is no impact on state government.**

**Roxanne E Clay -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 2)**

AGENCY **Counseling**

RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **27-09**

RULE NAME **Marriage and Family Therapist Fees**

CITE AUTHORITY **30-31**

FISCAL NOTE DETAIL -- SHOW OVER-ALL EFFECT IN ITEM 1 AND 2 AND, IN ITEM 3, GIVE AN EXPLANATION OF BREAKDOWN BY FISCAL YEAR, INCLUDING LONG-RANGE EFFECT.

Effect Of Proposal	Current Increase/Decrease (use ' - ')	Next Increase/Decrease (use ' - ')	Fiscal Year (Upon Full Implementation)
ESTIMATED TOTAL COST	0	0	0
PERSONAL SERVICES	0	0	0
CURRENT EXPENSES	0	0	0
REPAIRS AND ALTERATIONS	0	0	0
ASSETS	0	0	0
OTHER	0	0	0
ESTIMATED TOTAL REVENUES	0	0	0

Roxanne E Clay -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



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**AGENCY      Counseling**

**RULE TYPE    Legislative                      AMENDMENT TO EXISTING RULE    Yes    TITLE-SERIES    27-09**

**RULE NAME   Marriage and Family Therapist Fees**

**CITE AUTHORITY   30-31**

**3. EXPLANATION OF ABOVE ESTIMATES (INCLUDING LONG-RANGE EFFECT). PLEASE INCLUDE ANY INCREASE OR DECREASE IN FEES IN YOUR ESTIMATED TOTAL REVENUES.**

**N/A**

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PLEASE IDENTIFY ANY AREAS OF VAGUENESS, TECHNICAL DEFECTS, REASONS THE PROPOSED RULE WOULD NOT HAVE A FISCAL IMPACT, AND OR ANY SPECIAL ISSUES NOT CAPTURED ELSEWHERE ON THIS FORM.

The Board's main revenue comes from the renewal fees of the Licensed Professional Counselors-LPC. The non-renewal fees collected on a yearly basis have basically been the same for the last several years.

The proposed fee increases will not take effect until July 1, 2017; however, the Board will not see the increase from the LPC license renewal until June 2019.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

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**FORM 12 -- BRIEF SUMMARY AND STATEMENT OF CIRCUMSTANCES (Page 1)**

AGENCY **Counseling**

RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **27-09**

RULE NAME **Marriage and Family Therapist Fees**

CITE AUTHORITY **30-31**

SUMMARIZE IN A CLEAR AND CONCISE MANNER CONTENTS OF CHANGES IN RULE AND STATEMENT OF CIRCUMSTANCES REQUIRING THE RULE.

The Board has acquired additional expenses that were not budgeted for in previous years. (See Supporting Document' for further description.) A Finance Committee was formed in February, 2016 to establish a Board budget that is solvent and stable moving forward. It was determined an additional \$34,645 is needed annually to continue to operate and fulfill its mission in the protection of the public. The Board has addressed this deficit by proposing an increase in license renewal and non-renewal fees. Without a fee increase, the Board will be unable to continue to carry out its statutory duties.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**

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TITLE 27  
LEGISLATIVE RULE  
BOARD OF EXAMINERS IN COUNSELING

SERIES 9  
MARRIAGE AND FAMILY THERAPIST FEES RULE

**§27-9-1. General.**

1.1. Scope. -- This rule establishes fee requirements related to the licensing of marriage and family therapists, renewal of the licenses, and application and monitoring of continuing professional education providers and their programs.

1.2. Authority. -- W. Va. Code §30-31-6.

1.3. Filing Date. -- ~~April 26, 2010.~~

1.4. Effective Date. -- ~~July 1, 2010.~~

1.5. Sunset Provision Date. -- Ten years from effective date from passage.

**§27-9-2. Fee Schedule.**

2.1. Fees paid to the Board are not refundable.

2.2. Fees, with the exception of those for examination, are payable to the West Virginia Board of Examiners in Counseling (WVBEC).

2.3. Fees.

2.3.a. Initial application for licensure -- ~~\$200.00;~~ 250.00

2.3.a.1. The fee required for the issuance of the initial license certificate shall be calculated on the current renewal rate set in this rule, the date the license is issued and the number of days remaining in the current ~~biennial~~ annual renewal cycle;

2.3.b. ~~Reciprocity~~ Endorsement application processing -- ~~\$200.00;~~ 300.00

~~2.3.c. Fee for the regulatory board membership for all persons licensed through §27-8-6.4 is \$50.00, due at the time of initial application. This fee expires on July 1, 2012;~~

~~2.3.d.~~ 2.3.c. ~~Biennial~~ Annual license renewal fee -- ~~\$220.00;~~ 145.00

2.3.d. Retirement Status application and renewal fee -- \$72.50

~~2.3.d.~~ 2.3.e. Late renewal during 60 day period -- ~~\$50.00;~~ 100.00

~~2.3.e.~~ 2.3.f. Reinstatement for licensure renewal after the end of the 60 day period or

reinstatement following revocation or suspension of license -- \$250.00;

~~2.3.f.~~ 2.3.g. Examination score endorsement -- \$25.00;

2.3.h. Certification of supervised clinical experience endorsement -- \$25.00.

~~2.3.g.~~ 2.3.i. Name change on all records -- \$5.00;

~~2.3.h.~~ 2.3.j. Endorsement to another state or a National or State certification -- \$25.00;

~~2.3.i.~~ 2.3.k. Duplicate certificate -- \$10.00;

~~2.3.k.~~ 2.3.l. Filling a request for public information, print or electronic data, or other services relating to the Board, its members, or marriage and family therapists, is calculated based on the actual cost of materials, employee time, and services required to comply with the request; and,

~~2.3.l.~~ 2.3.m. Bad check fee -- as provided for in §61-3-39e.

#### 2.4. Continuing professional education provider and programs fees.

2.4.a. Certification as an approved provider of continuing professional education ~~biennially~~ \$150.00 \$250.00;

2.4.b. Certification as an approved provider of continuing professional education for one event -- ~~\$50.00~~ \$100.00 per day of event for non-profit and no fee to attending participants, or \$250.00 per event for profit and/or fee charged to attending participants.

~~2.4.c. Monitoring the continuing professional education records and activities of an approved provider for the purpose of quality assurance -- \$50.00 for one event in each biennial year cycle and \$100.00 for more than one event in each biennial year cycle; and,~~

~~2.4.d.~~ 2.4.c. ~~Biennial~~ Annual fee to re-certify as an approved provider -- ~~\$100.00~~ \$200.00 payable only after the Board has notified the provider that it is eligible to re-certify.

~~2.4.d.1. An approved provider who does not pay a fee to re-certify within 30 days of notice forfeits all rights and privileges of an approved provider.~~

#### 2.5. Examination fees.

2.5.a. Fee for the examination required by the Board is established by and payable to the Association of Marital and Family Therapy Regulatory Boards (AMFTRB) or its designee.