

Update: The Texas Association for Marriage & Family Therapist Case

written by Guest Author | June 15, 2016

This blog is an update to our previously posted blog outlining the current case in Texas regarding the [Right to Diagnose for Texas MFT's](#). For more updated content related to this matter, please visit our blog titled "[Great News! Texas Marriage & Family Therapists Can Continue to Diagnose](#)"

The Texas Association for Marriage and Family Therapists backed legislation during the 2015 Texas Legislative Session (HCR 84) that read in part: "RESOLVED, That the 84th Legislature of Texas hereby directs the licensure Board governing the state's mental health providers to use the Diagnostic and Statistical Manual of Mental Disorders, the International Classification of Diseases, and any other appropriately recognized classification systems, and billing codes therein, for evaluation, classification, treatment, and other activities by their licensees and in connection with any claim for payment or reimbursement from a health insurance policy issuer or other payer..."

Although this bill had overwhelming bipartisan support in both the State House and Senate, Governor Glenn Abbott vetoed the bill on May 18, 2015. The intent of this language in the bill was to provide a work around for the 3rd Court of Appeals decision in the suit filed by the Texas Medical Association against the Texas State Board of Examiners of Marriage and Family Therapists and the Texas Association for Marriage and Family Therapists. That decision barred LMFTs in Texas from making client diagnosis using the DSM or ICD in their practices. The decision is being appealed to the Texas Supreme Court. The intent of HCR 84 was to instruct the relevant agencies to maximize the tools available to them, to ensure that licensed, qualified mental health practitioners were eligible for reimbursement by insurance payors. It deliberately avoided using the term "diagnosis" and instead focusing on currently permissible activities including evaluation, assessment and treatment in a manner consistent with the classifications and billing codes contained in the DSM.

State studies documented that 173 out of 254 Texas counties are designated as Health Profession Shortage Areas (HPSAs) for mental health. If LMFTs and other licensed mental health professionals are unable to practice given the uncertainty of reimbursement, these shortages of access to mental health care will worsen.

All mental health professionals without medical licenses need to get involved and support the efforts by the SBEMFT and TMFT to assist in this battle against TMA. Ways to help include reaching out to legislators, contributing to the TAMFT Political Action Committee (PAC) or the Practice Protection Fund set up by AAMFT.

An interesting side note: According to Governor Abbot's campaign finance reports the TMA PAC contributed \$43,485.41 to the Governor in 2013 and 2014.