

Q24 If you were in charge, what changes would you make to the Council's statutes, rules, or processes, and why?

Answered: 1,147 Skipped: 1,913

#	RESPONSES	DATE
1	All hours/days/weeks should count towards licensure, not just full months. Also, since the SW exam is national, there should be better reciprocity between states for social workers to have their hours count when moving to Texas from another state.	2/3/2026 12:27 PM
2	N/a	1/31/2026 12:52 PM
3	Larger staff presence.	1/31/2026 10:53 AM
4	Allow school psychologists to practice outside of schools under supervision of LP Allow school psychologists to provide counseling services for persons 21 and under without supervision	1/31/2026 9:39 AM
5	How CEU's are obtained. Live seminars are wonderful but not always practical due to demands of work requirements	1/31/2026 9:20 AM
6	n/a	1/31/2026 8:37 AM
7	I don't have any recommendations at this time.	1/30/2026 12:15 PM
8	Don't know yet.	1/30/2026 10:44 AM
9	I'd remove the 50% rule. With the addition of tracking using CE Broker now it should cut down on issues with proper CE management and the honor system. I would also remove the ability for associates to own their own private practice. This would be reserved for fully licensed professionals to allow more time for training and oversight before adding a business to their options.	1/30/2026 8:28 AM
10	If there is an advanced degree in the field, like a doctorate and experience that more than shows advanced skills over a set number of years, starting at an associate level would not be the best option. For example, the trades (electricians and etc.) have required verification of experience, hours, and years that allows for licensure.	1/29/2026 8:15 PM
11	I would make it easier to be contacted by phone. A lot of people have complained in the past that it is difficult to get to speak to someone. I haven't tried calling myself. However, I would work on that issue.	1/29/2026 7:03 PM
12	If I were in charge, I would focus on making the Council's statutes, rules, and processes more accessible, efficient, and supportive for both new and experienced professionals. One of the first changes I would consider is streamlining the licensure process—particularly around supervised hours and internship requirements. While these standards are important for ensuring competency, the current structure can be difficult for individuals who are supporting families or working full time. Offering more flexible pathways, such as paid internships or alternative supervision models, would help reduce financial and logistical barriers. I would also look at simplifying the administrative steps involved in applying for or renewing a license. Clearer guidance, faster processing times, and more user friendly online systems would make it easier for licensees to stay compliant without unnecessary stress. Another area for improvement would be increasing access to qualified supervisors, especially in rural or underserved areas. The Council could support this by expanding remote supervision options or creating a centralized directory of approved supervisors. Finally, I would explore ways to reduce the overall cost burden associated with licensure—such as exam fees, application fees, and continuing education requirements—while still maintaining high professional standards. Lowering these financial barriers would help attract and retain skilled social workers, ultimately benefiting the communities we serve.	1/29/2026 4:46 PM
13	Get rid of the requirement to upload CE. Revisit the current process and fees	1/29/2026 4:45 PM
14	I'm not a specialist in regulatory law, but it seems there should be a way to separate the rules so that we have a set of rules that regulate the practice of school psychologists and another	1/29/2026 2:33 PM

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set that regulates the practice of clinical practitioners - sort of like what was done when the supervision rules were revised some time ago. This may create some duplication, but it would help differentiate the regulations for these separate areas of practice.

15	More personal responsibility and accountability of LPC/LMFT Associates than everything placed on their Supervisor.	1/29/2026 2:17 PM
16	Ma	1/29/2026 1:23 PM
17	searchable database of laws/rules/regulations with changes/updates clearly highlighted - emails notifying of those changes/updates, interactive quizzes or study cards with information, regular email newsletters outlining licensing issues occurring in the state (like newsletters from malpractice insurance providers)	1/29/2026 1:01 PM
18	Not to entirely sure. I know there is very confusing information and the ability to acquire a concrete answer between the Intern hours that are able to transition into the Associate hours count. My university referred me to read the rules and the rules were very confusing.	1/29/2026 12:42 PM
19	Be more accessible. I miss the days of LPC and LMFT board. Seems it was easy to reach them and ask questions.	1/29/2026 11:01 AM
20	Re-write the rules and publish it on-line with a search option	1/29/2026 10:32 AM
21	To advocate for Imha staff to receive a cost of living raise.	1/29/2026 4:28 AM
22	Stream line please. Focus on rules of safety and security, qualifications scope of practice and who can practice	1/28/2026 11:41 PM
23	I would have to think about this further	1/28/2026 9:22 PM
24	A more accessible website for licensed professionals.	1/28/2026 8:45 PM
25	I would make systems training mandatory for everyone who is licensed to practice behavioral health.	1/28/2026 8:08 PM
26	Not sure at this time.	1/28/2026 4:38 PM
27	None	1/28/2026 3:37 PM
28	I still think there needs to be an exception for a established client to be required to be in the state, i.e. some travel periodically & others go away to college. Continuance of care is vital for some out these clients.	1/28/2026 3:02 PM
29	Rules- that recognition of diversity is not just a want, it's a necessity in professional counseling. The change that was made regarding requirements of multicultural ceu's - to 'distinct populations' was unnecessary and broadens where it is harmful and allows for LPC's to not receive and recognize other cultures because they can define distinct populations however they want.	1/28/2026 1:40 PM
30	Have reciprocity to practice with other states made easier if you are licensed already and been in the field for over 10 years	1/28/2026 1:36 PM
31	re-establish the oral exam for psychology to become licensed in Texas	1/28/2026 1:29 PM
32	More oversight on supervisors. A system to help supervisees find supervisors. I have an abusive supervisor, and I can't leave without risking her retalitaing and ruining my career.	1/28/2026 1:01 PM
33	Possibly providing a longer licensing period? For example, allowing us to purchase a 2- or 5-year license. It would just be more convenient.	1/28/2026 11:37 AM
34	I don't know	1/28/2026 10:52 AM
35	None	1/28/2026 9:49 AM
36	N/A	1/28/2026 9:05 AM
37	I'll let you know. Have to consider it.	1/28/2026 8:41 AM
38	I feel that a lot of the things that occur on the council are politically motivated rather than being in the best interest of the people that we serve or protecting our profession.	1/28/2026 7:22 AM
39	Streamlining rules so they are easy to find. Some rules are mentioned in more than one place	1/28/2026 2:28 AM

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and can be misleading if you're not thorough in making sure you are reading the appropriate rule for your situation.

40	Thats too broad of a question.	1/27/2026 11:25 PM
41	Would join the interstate licensing compact to make consistency in caring for patients that move across state lines possible. Would not ban being able to provide telehealth services when someone is out of state for travel or vacation or recently moved and hadn't found a different provider yet.	1/27/2026 9:44 PM
42	There are a couple of things that aren't exactly clear, and it's important that the rules be CLEAR so they can be followed. Two examples: 681.38(d)(7) states: "The licensee must not enter into a non-professional relationship with a client's family member or any person having a personal or professional relationship with a client if the licensee knows or reasonably should have known such a relationship could be detrimental to the client." In all other places, the rule is not to enter into a "non therapeutic" relationship. But a "non-professional relationship" is not defined in the earlier section where definitions are laid out. What exactly constitutes a non-professional relationship? For example, an employment relationship is a professional relationship, but is not a therapeutic one. Serving on the Board of a non-profit is also "professional" in most cases, but is not therapeutic. May these things be done with "family members of clients" if it will not cause harm? Another example is 681.42(e) which reads: "In accordance with the §503.003(b)(1) of the Act, the use of standardized projective techniques is prohibited. This prohibition includes, but is not limited to, the Rorschach Inkblot Test, the Holtzman Inkblot Test, the Thematic Apperception Test, the Children's Apperception Test, and the Senior Apperception Test." This is fair and appropriate, except it should have after something like "Unless the licensee also possesses another license which permits the use of these instruments or is enrolled in a doctoral program leading to licensure that will permit the use of these instruments and is participating in a university-sanctioned internship that requires the learning of these instruments." The reason I bring this up is that I am currently licensed as an LPC, but I am also enrolled in a program that will lead to a PsyD that includes a 1750 hour internship that is expected to meet the requirements for licensure as a psychologist. It has been my intention to maintain my LPC once I am licensed as a psychologist because I am already practicing under my LPC and serving clients who use health insurance. Because it will take some time to be licensed as a psychologist and then enroll in all the health insurance programs as a psychologist, there will be overlap. But my duties as a psychologist may include having to use these instruments. As the rule reads, I would be violating it under a technicality.	1/27/2026 8:36 PM
43	Opportunities for student loan forgiveness	1/27/2026 7:23 PM
44	Reduce supervision hours to 2000 for all temp licenses	1/27/2026 7:15 PM
45	Individual with difficult cases should be able to speak with the board to provide clarification.	1/27/2026 6:33 PM
46	Create rules and processes that more clearly state what the update means when compared to the replaced version. Different people understand change better as it applies to the individual.	1/27/2026 5:37 PM
47	streamline the rule change process if possible;	1/27/2026 5:09 PM
48	Continuing education - remove distinct population requirement, lessen ethics requirement to 3 hours, remove telehealth refresher from LMFT CE, require jurisprudence for all licenses; Complaint process - it would be helpful to publicly see the outcome of complaints to know common pitfalls for licensees.	1/27/2026 4:56 PM
49	None	1/27/2026 4:46 PM
50	Honestly, I think the statutes, rules, and processes are a great ethical standard. I would probably advocate for an "electronic liason license" or something that telehealth members can use to accept clients outside of their state (for telehealth only), and also advocate for a compromise on the acceptability of becoming fully licensed in other states to be more of a universal check list rather than some states needing 800 hours or some needing 5000 - like if you are fully licensed in one, there should be some kind of acceptance of that work in others. Do medical doctors have to get licensed in each state? Like just because we cross state lines, or our clients are outside our borders doesn't make our knowledge and expertise any less valid or needed.	1/27/2026 2:44 PM
51	I would not change a thing.	1/27/2026 1:53 PM

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52	The mass emails sent from the agency to the different stakeholders should specify in the title which mental health licensing group the email pertains to. If it pertains to one or more, than it shld state that as well. BUT, it's inefficient for the agency as well as the recipient to scan the first part of the email to determine it's applicability.	1/27/2026 1:23 PM
53	None. I believe the statutes, rules and process are adequate.	1/27/2026 1:21 PM
54	Get rid of lengthy supervision requirement	1/27/2026 12:58 PM
55	just work on call times to be more direct.	1/27/2026 12:21 PM
56	N/A	1/27/2026 11:53 AM
57	It would be great if a little more discretion could be applied with complaints that are made in bad faith or obviously frivolous.	1/27/2026 11:15 AM
58	none	1/27/2026 10:31 AM
59	I would be a strong advocate for Social Work as a profession	1/27/2026 10:28 AM
60	I would make it easier for LMSW's to get clinical hours.	1/27/2026 10:25 AM
61	Hard to say, because I bet there are reasons for certain things or rules. However, we want to make sure the council does become so reactionary that every new issue theres a rule. Consider the unintended consequences and impact of all rules to ensure they make sense for the greater good.	1/27/2026 10:03 AM
62	I would like to see the 3 hours of cultural competency broadened into a wider acceptance of criteria. I am a service director in public housing and have searched out several trainings through HUD regarding the population I serve. But most do not offer CEU's, so I do additional trainings on top of the required ones. But I feel it's important for me to be competent in this field and truly understand the dynamics. When I worked on my specialization in gerontology, I attended Medicare trainings that offered CEU's. This feels very similar.	1/27/2026 9:46 AM
63	Again, I do think LPC representation on the board is important. I would like to see Texas allow LPCs to have the privilege to practice outside Texas borders (like other states). I believe pursuing this function is the board's responsibility.	1/27/2026 9:14 AM
64	The only thing that I can think of, is maybe having a person as an advocate for us. Maybe a person to go in between the board and us as a group. But I also think that may be the Texas counselor's Association job	1/27/2026 7:36 AM
65	I can't think of anything	1/27/2026 7:02 AM
66	I would cap the number of assigned to those working in acute care and residential and not allow staff that may be licensed, but not carrying caseloads to be counted in those numbers.	1/27/2026 6:57 AM
67	Allow school psychologists to practice in private capacity - complete evaluations but not counseling (we are qualified to complete evaluations but not necessarily to do private counseling)	1/27/2026 6:56 AM
68	I think lots of positive changes have been made. I hope they keep up the good work.	1/27/2026 4:52 AM
69	Make it less expensive and for the Council to loudly advocate for these professions make more money and be valued more.	1/27/2026 2:08 AM
70	Clarification of Associate Scope of Practice Guidance on Coaching vs. Therapy Standardized Supervision Requirements Supervisor Accountability and Reporting Mechanisms Associate Representation in Rulemaking Formal Advisory Opinions and Interpretive Guidance Uniform Standards Across Behavioral Health Disciplines Transparency in Complaints and Enforcement Processes	1/26/2026 11:05 PM
71	N/s	1/26/2026 11:00 PM
72	I would simplify the rules and statutes use a quick reference guide.. as this would make them much more easier to obtain and understand!	1/26/2026 10:28 PM
73	Give all members upgraded laptops with better cameras for online meetings.	1/26/2026 10:27 PM
74	I would readdress the social work exams. Provide alternative options for test takers that have a hard time passing, offer more support, other options that they can do in the field of social	1/26/2026 10:01 PM

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work instead of having to loose their job because they cant pass the exam, people taking 5,6,7,8,9,10,11,12 times. I just wish there will be another way to hep the social workers. I am glad that the test was revised. Thank you for that

75	not sure, more employees to speed up board complaint processes	1/26/2026 9:57 PM
76	Hire more phone staff who can answer questions quickly.	1/26/2026 9:55 PM
77	See #18	1/26/2026 9:30 PM
78	Provide branch locations where technology and in-person support is available for license CEU resources, and license renewal.	1/26/2026 9:09 PM
79	Not sure.	1/26/2026 8:52 PM
80	None. I think the statutes and rules are fair. The processes are simple.	1/26/2026 8:49 PM
81	Possibly less CE hours	1/26/2026 8:39 PM
82	Restructure and return to a real medical / scientific model and resist cultural pressures.	1/26/2026 8:38 PM
83	None	1/26/2026 8:35 PM
84	If I were in charge, I would look to have more reciprocity with other states. I believe we are somewhat handicapped in offering counseling services when a client is on vacation in another state.	1/26/2026 8:19 PM
85	I would conduct a thorough assessment of all rules, laws n protocols and discard excessive Constraints n limitations upon clinicians.	1/26/2026 7:55 PM
86	I would advocate for modernization of licensure processes, including support for interstate practice through participation in the counseling compact and streamlined administrative procedures. These changes would expand access to care, reduce unnecessary barriers for qualified clinicians, and better align Texas with national mental health standards while maintaining strong protections for the public.	1/26/2026 7:44 PM
87	Offer and clearly provide approved CE trainings that are proven effective regarding every area of counseling work training and create support networks and community for the licensed professionals sharing resources and support for self care and reduction in burn out	1/26/2026 7:36 PM
88	Compact state licenses to better streamline work between states	1/26/2026 6:55 PM
89	I would put rules around the use of AI in sessions.	1/26/2026 6:30 PM
90	Working with insurance companies or advocating to get insurance companies to accept LPC Associates for services. making sure that 1-2 people on the complaint board are therapist.	1/26/2026 6:29 PM
91	The council should NOT allow the Texas State Board of Examiners of Psychology to create an "alternative" licensing exam. Why not provide an "alternative" licensing exam to other mental health boards (e.g., LPCs, LCSW, LMFT)? This seems highly unfair and borderline discriminatory to other candidates who practice or intend on practicing under TBHEC. Instead of that, TSBEP should work collaboratively with the ASPPB to provide input into modifying and improving one (1) licensing exam. There is no longer a Part I and Part 2 for the EPPP. Therefore, why is the TSBEP continuing to fight requiring passage of a national exam for entry level candidates, especially from fully online, non-APA accredited schools? Would you want your physician or dentist to have taken an alternative exam, rather than a time and tested national exam before operating on you?	1/26/2026 6:28 PM
92	It seems there are a lot of rule changes. I cannot keep up with them. It would be nice to get a summary document every 6 months that identify changes for that period.	1/26/2026 6:20 PM
93	unknown	1/26/2026 6:13 PM
94	Remove the MSW license requirements. Some states for not require the exam and Social Works receive a limited license until they obtain post graduate Supervised hours.	1/26/2026 6:11 PM
95	Give different methods of taking licensing exams. Multiple choice method of taking exam is not good for everyone.	1/26/2026 5:35 PM
96	I think you're good	1/26/2026 5:29 PM
97	I appreciate the ongoing transition to online applications and attempting to reach underserved	1/26/2026 5:25 PM

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populations, like bringing awareness to victims of sexual trafficking. I do think that the removal of cultural competency was a mistake and ultimately weakens our ability to serve the population of our state of Texas.

98	no immediate thoughts	1/26/2026 5:19 PM
99	I don't much to say because I have not been attending meetings due to some family issues.	1/26/2026 4:54 PM
100	N/A	1/26/2026 4:39 PM
101	None	1/26/2026 4:24 PM
102	Have clearer explanations and examples on how to use the system for the new reporting of continuing education credits.	1/26/2026 4:21 PM
103	I would separate the codes and rules by type of license because it's an easier way to understand and find	1/26/2026 4:17 PM
104	?	1/26/2026 4:14 PM
105	I would make it free for LPC's to access the education and filing paperwork to become LPC Supervisors and assist them in getting connected to quality LPC Associates.	1/26/2026 4:13 PM
106	Lobby for LPC's to bill Medicare	1/26/2026 4:08 PM
107	Texas needs to join the Social Work compact	1/26/2026 4:01 PM
108	Return to the original multicultural competency language that is in keeping with the APA ethical guidelines.	1/26/2026 3:38 PM
109	Can't think of any	1/26/2026 3:37 PM
110	Separate professional clinical licenses into one group.	1/26/2026 3:26 PM
111	none	1/26/2026 3:23 PM
112	Streamline licensing process enabling people to pay less money and demonstrate abilities without taking a test that current psychologists would have difficulty passing. Many people with high school degrees or job training certificates make more money than we make, so there is little incentive to go into the field unless you have a passion for helping others and have additional sources of family income.	1/26/2026 3:04 PM
113	Not sure.	1/26/2026 3:00 PM
114	I would consider employing/contacting Supervisors through BHEC. While Associates pay affordable/reasonable dues directly to BHEC, for the supervision services of its approved Supervisors.	1/26/2026 3:00 PM
115	None	1/26/2026 2:57 PM
116	N/a	1/26/2026 2:54 PM
117	more texas locations	1/26/2026 2:52 PM
118	Lower CEUs back to 24 hours ever 2 years	1/26/2026 2:51 PM
119	Not sure	1/26/2026 2:48 PM
120	LPC is good for 5 years. The credentialing process be shortened, amended, and more efficient. There should be reciprocity for LPC in Texas with all the other states.	1/26/2026 2:37 PM
121	increased support for licensees (having other LPC's on the committee/board) who have had a complaint filed against them	1/26/2026 2:27 PM
122	Better communication with clinicians when complaints are filed against them.	1/26/2026 2:19 PM
123	This is why I am not in charge.	1/26/2026 2:18 PM
124	I am also licensed in Ca. Texas is far more user friendly and easier to navigate the entire process than Ca is.	1/26/2026 2:18 PM
125	None	1/26/2026 2:07 PM

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126	I think reciprocity should be given to any person meeting NBCC type standards or credentials. Due to disasters and licensing maybe we could develop easier ways to activate those inactive or maintain special disaster ready counselors even if they are out of state.	1/26/2026 2:06 PM
127	shorter time period to apply for LPC- Supervisor (maybe 3 years as opposed to 5)	1/26/2026 2:01 PM
128	Fewer processes	1/26/2026 2:01 PM
129	I would change the requirements listed in question 19.	1/26/2026 1:53 PM
130	simplify	1/26/2026 1:52 PM
131	Change how flags get put on license as to not permanently cause harm to those that serve our communities.	1/26/2026 1:46 PM
132	None	1/26/2026 1:43 PM
133	Create a specific division responsible for creating guidelines, protocol, and information regarding Telehealth. Ensure that providers, including those in private practice, have access to QUALITY personal health care plans and retirement plans. This would likely entail creating an online market place, with subsidized plans. Create local delegates that can assist providers with questions/concerns and provide a general resources/ethics hotline.	1/26/2026 1:42 PM
134	Renewal cost and system	1/26/2026 1:41 PM
135	Taking a public stand on issues in the news.	1/26/2026 1:33 PM
136	create provisions for out of state counseling based on the needs of the client with clear documentation	1/26/2026 1:22 PM
137	Have a system in place (like HPSO) that allows me to request a certificate of proof I am a currently licensed LPC and my expiry date.	1/26/2026 1:21 PM
138	I'm not familiar enough with everything to comment.	1/26/2026 1:20 PM
139	unknown	1/26/2026 1:19 PM
140	easier way to search topics	1/26/2026 1:18 PM
141	I'd have social workers monitoring social workers	1/26/2026 1:15 PM
142	Lobbying the Counseling compact bill for TX professional counselors.	1/26/2026 1:11 PM
143	I would allow for renewal for LPC every 5 years instead of 2.	1/26/2026 1:06 PM
144	N/A	1/26/2026 1:03 PM
145	The time goes by so fast and not all questions are answered in our meetings. Perhaps before the meeting, providing us a time frame to submit our questions.	1/26/2026 1:02 PM
146	None	1/26/2026 1:01 PM
147	I would be regulating the teaching more. There is a very heavy emphasis on progressive ideals and conservatives-again- are painted as the bad guys. Many times in graduate school I was told to keep my beliefs out of the therapy room, but not we have therapists all over the place stating they are **insert population of choice** affirming. No one should be advertising they are affirming anything. That is not therapy, it's agreement.	1/26/2026 12:57 PM
148	Simplify them, make sure what's on on line is readable by having input from the professionals using it	1/26/2026 12:51 PM
149	-	1/26/2026 12:49 PM
150	I would make changes on how much an agency can keep when using an independent counselor to counsel. Some are keeping 60 percent of the fee for counseling and they are not counselors.	1/26/2026 12:48 PM
151	That's a tough one. I'm not sure. I would have to look at all of it with great detail and process this thoroughly.	1/26/2026 12:45 PM
152	N/a	1/26/2026 12:43 PM
153	The info most counselors needs are far into the Rules publication. Could invert some of that to	1/26/2026 12:42 PM

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cite Counseling Board internal practices later in the document.

154	I would have a live human being customer service option as an CE broker option - at least for the first year when the system is new. I would have a readily accessible phone line for the Social Work Board and live customer service to answer question on a regularly scheduled working day. To be honest, it has probably been 10 years since I tried to call my social work board. They never answered the phone and I gave up a long time ago.	1/26/2026 12:40 PM
155	Nothing at this time other than the Compact.	1/26/2026 12:38 PM
156	They were fine like they were. If there's an institution, that's big enough to make you make this move make them pay their selves for their own proprietary contract with you not all of us pay the price with a CE broker from Florida, not, Texas.	1/26/2026 12:35 PM
157	I believe the Council is doing excellent work. I would like to see an increase in council generated advertising to the public regarding the availability of professional and confidential counseling. I would also recommend returning to the practice of providing a very professional looking license with seal, signed by all Council members, suitable for framing and display in our counseling offices. LPC counselors would be willing to pay for such a certificate and it would elevate the professional look versus the current "permit" to practice.	1/26/2026 12:32 PM
158	I understand that changes need to take place to continue to grow our profession but it would be beneficial that we could anticipate when new rules and regulations will be implemented. I would suggest having two times in the year to implement new rules and regulations, so that we are not constantly on our toes and scrambling to implement changes to our documents.	1/26/2026 12:28 PM
159	It seems to me that every function required additional licensing. I moved to Texas from Illinois. In Illinois as an LCSW, I was able to do CEU training, clinical supervision, and Behavioral Health Therapy, crisis response therapy, also adults and children	1/26/2026 12:27 PM
160	No comment	1/26/2026 12:25 PM
161	I like the process- it's just time consuming.	1/26/2026 12:24 PM
162	Reduce number of ces required for seasoned practitioners after 20 years of practice.	1/26/2026 12:22 PM
163	Fewer hours for licensing. More understanding with certain violations of the rules.	1/26/2026 12:21 PM
164	Too much to type	1/26/2026 12:20 PM
165	An interim or provisional status should also be available while associate licensure applications are being processed. Delays at this stage prevent clinicians from working despite having completed all educational requirements, resulting in unnecessary financial hardship. Within the licensure structure, the LMFT license should be recognized as a higher-status specialization relative to the LPC license, reflecting its distinct training and scope of practice. Specifically, couple and family therapy should be restricted to LMFTs, as LPC programs do not provide the same depth of systemic or relational training. Clear regulatory boundaries are needed to ensure scope of practice aligns with formal education and clinical preparation. Additionally, professional boards and state lawmakers should collaborate with insurance providers to advocate for fair reimbursement structures and sustainable supervision requirements. Without systemic reform, current policies continue to undermine workforce stability and access to care. If these structural changes are not feasible, then educational requirements and the length of the associate period should be reevaluated. Clinicians are not currently compensated at a level commensurate with the educational, financial, and time investment required to obtain licensure. Aligning compensation, scope, and requirements is essential to maintaining a viable and ethical mental health workforce.	1/26/2026 12:13 PM
166	not sure	1/26/2026 12:09 PM
167	Intense oversight of the CEU vendor platform and the use of the free version versus the paid version	1/26/2026 12:09 PM
168	I might have more people staffing it and answering questions.	1/26/2026 12:06 PM
169	Find alternative ways for licensing that's more reflective of actual ability to do the work, join the PACT, no jurisprudence course every two years, move to have Ethics requirements be uniform across all states	1/26/2026 12:04 PM
170	Online CE reporting more time consuming. Just continue with random audits	1/26/2026 12:00 PM

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171	None	1/26/2026 12:00 PM
172	Agree to the interstate compact. Lower the barriers to entry into the profession. Paid internships. Advocate for better pay for social workers in general.	1/26/2026 11:57 AM
173	I think as changes occur in a particular licensing: to put out an email stating those changes clearly so the licensee can adhere to0	1/26/2026 11:56 AM
174	I would make it mandatory that grad students have to take at least 2-3 business classes as part of their program in order to get licensed. I would also nix the allowance of Associates to have their own independent practice - I think it's irresponsible.	1/26/2026 11:52 AM
175	No immediately need seen to change anything at this time.	1/26/2026 11:50 AM
176	Send out notifications for any licensing expirations — please require a signature that the notification was received	1/26/2026 11:45 AM
177	N/A	1/26/2026 11:41 AM
178	Waive fees for all military/veteran members, implementing check in with LPC-ASSOCIATES to check in on LPC-S and ensure correct supervision is being done and not to micro manage yet for education purposes	1/26/2026 11:38 AM
179	It would definitely be best that I NOT be in charge :-)	1/26/2026 11:34 AM
180	I would have more advocacy to join the Counseling Compact.	1/26/2026 11:31 AM
181	1. Licensees who qualify based on a national exam, should be nationally recognized in the age of telehealth. As transition in that direction, I'd begin with a condition--a client who has been with a therapist for at least one year, may continue with that therapist if the client moves out of state. 2. As semi-retired LMFT who was an MFT before we had licensure, I would put myself on the licensing board as a way of giving back to the profession. I live in Austin, have time, experience and interest. If you need a member and can get republicans to include someone who is not, I'm your man.	1/26/2026 11:29 AM
182	N/a	1/26/2026 11:28 AM
183	Please read above comments. 1) send out yearly ETHICAL BEHAVIOR SURVEY. 2) anonymous 3) ask for Agency names where SWs behave unkindly and/or meanly to each other.	1/26/2026 11:28 AM
184	See above: make those who serve the public record (aka court records) have more transparency in the board's oversight: why aren't you looking at complaints en masse vs one at a time on those who are hired as court experts?	1/26/2026 11:25 AM
185	I don't have suggestions.	1/26/2026 11:25 AM
186	I would remove the requirement for LPCs to provide diagnoses to private pay clients. (Bad enough that insurance companies require it. This diagnosing/labeling is useful in some cases, but can be damaging in others.) In addition, I would adjust the CE rules to accept an unlimited amount of hours directly related to doctoral-level studies.	1/26/2026 11:22 AM
187	I would like to see more clarity in how the rules are written, distributed, and interpreted for laypeople. Many of our rules are best interpreted by an attorney, and not all of us have access to legal council to help provide guidance.	1/26/2026 11:16 AM
188	I am not familiar enough with them to give an informed opinion.	1/26/2026 11:16 AM
189	More streamlined process between graduate programs and obtaining independent licensure for career advancement.	1/26/2026 11:10 AM
190	Create a Counseling Compact for Texas. Strongly and effectively lobby the Texas legislature to enact the necessary legislation to create a Counseling Compact.	1/26/2026 11:05 AM
191	N/A Mind balance, avoid ideological capture.	1/26/2026 11:03 AM
192	Make it more clear to the general public who's a licensed counselor and who can use the word, counselor and counseling	1/26/2026 11:03 AM
193	Please see my previous response.	1/26/2026 10:57 AM
194	Host listening hour and licensure updates for associates specifically Each licensure board	1/26/2026 10:52 AM

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	hosts its own listening hour quarterly or biannually	
195	Nothing to add here.	1/26/2026 10:50 AM
196	More information sharing about changes in legislation and how to be compliant with legislation is needed with timelines communicated. Work hard to get the Interstate Compact Act completed.	1/26/2026 10:50 AM
197	assigned a designated representative to guide aspiraant	1/26/2026 10:47 AM
198	none	1/26/2026 10:46 AM
199	Still submit CEUs by paper. I am not good at computer use, don't have a scanner.	1/26/2026 10:42 AM
200	I would add staff so that basic questions about licensure can be answered instead of deflected. The council could also take a more active role in helping to define scope of practice and professional identity development.	1/26/2026 10:41 AM
201	Not sure	1/26/2026 10:39 AM
202	I haven't run into anything that I really want to change other than web site stuff.	1/26/2026 10:38 AM
203	Streamline the complaint process and be willing to make criminal referrals when appropriate.	1/26/2026 10:35 AM
204	Reduce the required number of CEUs to renew license by at least 20 hours.	1/26/2026 10:34 AM
205	I don't want to be in charge.	1/26/2026 10:34 AM
206	I would take social work back out of the council so we could have our own.	1/26/2026 10:32 AM
207	Would likely make some of the CEU requirements one and done.	1/26/2026 10:31 AM
208	I would consider how many CEU's are required for individuals actually working in the field versus those that have a job outside of or aren't practicing on a day to day basis. I would make the website user friendly. I would provide a template for tracking CEU's that everyone has to use.	1/26/2026 10:28 AM
209	I would write the statutes, rules, or processes in layman's terms for consumption.	1/26/2026 10:26 AM
210	Better investigation and communication to explorers and credentialing if there is a probated license	1/26/2026 10:20 AM
211	None	1/26/2026 10:19 AM
212	I provide mental health professionals with ForeWarn which is used by Realtors for their safety. After hearing of the counselor in Florida being murdered by a client, this is of the utmost importance.	1/26/2026 10:17 AM
213	everything is ok for now	1/26/2026 10:15 AM
214	n/a	1/26/2026 10:14 AM
215	I would allow more freedom re: continuing ed and drop current requirement for human trafficking EVERY licensing period.	1/26/2026 10:14 AM
216	none	1/26/2026 10:11 AM
217	Accessibility to speaking to a real person to obtain our information because our licenses are important to continue our profession in serving others.	1/26/2026 10:11 AM
218	Not sure.	1/26/2026 10:10 AM
219	I am not sure.	1/26/2026 10:10 AM
220	Advocate that LPC's are qualified for positions advertised for SW's only. LPC and SW license remain the same; however there some LPC's have been in "SW" positions long term, therefore their qualify for said SW positions. Often times, LPC's are required to work in community mental health facilities to obtain their licensing hours. While in these settings, they are performing one-on-one sessions, but also completing SW tasks. I would also increase the pay threshold for LPC's with insurance companies, community mental health organizations/companies, and other's alike. People working in other profession's are valued more and I believe this starts with their licensing board or how they are viewed/respected by	1/26/2026 10:10 AM

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their board. Other professional's who provide direct care are paid at a professional rate. Professionals in the LPC field, frown upon those who charge more than \$100 per session, however a 15-30 minute appointment with an MD is billed/paid at three times this amount.

221	See #18	1/26/2026 10:09 AM
222	I would move LCDC licensing under the same council as LPCs, LCSWs, LMFTs, etc.	1/26/2026 10:07 AM
223	Defining roles of LPCs when it comes to providing "evaluations" for learning disability, autism and other disabilities. This is happening especially in Laredo Texas as well as other rural areas with a high amount of LPCs in the community.	1/26/2026 10:07 AM
224	The first thing I will do is enforce a rule that regulates a number of clients one mental health professional can serve per week to 20 or 25 tops. This will ensure agencies do not put pressure of quickly burn out a m.h professional that has recently graduated or obtained their license. Regardless, I would make that a universal rule. For all, not matter how long you have been in the business. It is not safe to have someone work with a case load of over 40 clients which I have seen happening and experienced myself. That will quickly exhaust a person which will lead to them making wrong choices or decisions. Create rules to protect more the professional. There has to be a balance between being the enforcer of the rules and being and serve as the protector of those who are working in the field.	1/26/2026 10:07 AM
225	I see licensed counselors who get into conflict with former clients and others on social media regarding their personal views. This is unprofessional. I'd like to ask these license holders, "Why does your client know your personal views?"	1/26/2026 10:07 AM
226	I would reduce the High Cost of Licensure.	1/26/2026 10:06 AM
227	Making it a priority for us to participate in the Interstate Licensure Compact! This would be so helpful in both Texas and the rest of the country. Let's get this done!	1/26/2026 10:05 AM
228	Streamlined license application	1/26/2026 10:03 AM
229	NA	1/26/2026 10:02 AM
230	Promote diversity again.	1/26/2026 10:00 AM
231	I would try to reduce the total rules by at least 30%. I would "un-do" the separate licensing of Master's level psychologists. I would try to legislate clear differences between LPs, LPAs, LPCs, LCSWs, etc; the public *cannot* tell the difference. I don't know how I'd do it, but I'd try to get licensing complaint resolution time to 6 mos or less.	1/26/2026 9:57 AM
232	See previous responses. This survey seems long and redundant. In schools, surveys like this seem mainly purposed at merely fulfilling an organizational process. I hope these are actually read and taken into account.	1/26/2026 9:57 AM
233	N/a	1/26/2026 9:56 AM
234	The Council needs to allocate sufficient funding to hire and properly train investigative and legal staff. Handling of complaints is not timely and not legally sound.	1/26/2026 9:54 AM
235	I would make it friendlier to engage in. Everything is bulky and difficult to understand. There's no positivity in it - feels too depressing.	1/26/2026 9:54 AM
236	I would 100% continue to make it a requirement that a member of the LPC board remain a part of ALL complaint hearings. Removing a licensed member of the board makes no sense. Please keep attending these hearings.	1/26/2026 9:53 AM
237	n/a	1/26/2026 9:49 AM
238	N/a	1/26/2026 9:47 AM
239	I would make them clear and to the point. Too much legalize and words. Make them easier to follow.	1/26/2026 9:47 AM
240	Make it easier to practice telehealth outside of the state of Texas (to see current clients while they or I are outside of the state). Reinstate cultural competency as CE requirement.	1/26/2026 9:46 AM
241	NA	1/26/2026 9:45 AM
242	Not sure	1/26/2026 9:42 AM

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243	None that I can think of.	1/26/2026 9:41 AM
244	An LPC-A would need to work within an agency or under a supervisor's private practice. There's too much liability. I would want those protections.	1/26/2026 9:41 AM
245	At the time, I'm not sure.	1/26/2026 9:39 AM
246	I am developing a cultural competency training for gentile therapists who would like to work with a very traumatized Jewish community.	1/26/2026 9:39 AM
247	idk	1/26/2026 9:37 AM
248	Create your own licensing tests that allow for more specialized aspects of the provision of psychological services.	1/26/2026 9:37 AM
249	Already addressed	1/26/2026 9:37 AM
250	Less focus on sex trafficking every renewal cycle- one time is enough. Less focus on culturally different- or now termed distinct- which is more inclusive.	1/26/2026 9:36 AM
251	add more p.o.c to the council	1/26/2026 9:34 AM
252	People would have to swear that their complaint is true. Arbitrarily filing a complaint is damaging to the profession.	1/26/2026 9:34 AM
253	Remove the rule of limiting virtual hours for LMFT Associates to 750. Improve training and vetting of supervisors to ensure ACTUAL supportive and competent individuals are in these roles. Create some sort of class or information page on how to work with insurance, as grad school programs do not teach this or prepare students to format notes/treatment plans for this type of work.	1/26/2026 9:34 AM
254	Reciprocity to offer services to surrounding states.	1/26/2026 9:33 AM
255	When licensed professionals give presentations, workshops or training, that we be able to count that towards CE. We do a lot of research and time spent to prepare and it would be appreciated to be able to "count" it towards renewals.	1/26/2026 9:33 AM
256	Follow up on how the CE broker program is working and satisfaction of the providers. There is limited customer service assistance and no number to call. Most answers just say buy the upgraded version.	1/26/2026 9:33 AM
257	Change licensure to a National license not by state - this is especially important for Telehealth. Counselors should be able to continue to see clients when they're on vacation or if they move to a different state without interrupting their care.	1/26/2026 9:33 AM
258	Wait, what? I'm not in charge? Rats! Seriously, the Council serves us well.	1/26/2026 9:32 AM
259	So many things. Go to any state that is doing this better and learn.	1/26/2026 9:27 AM
260	?	1/26/2026 9:26 AM
261	Advocate for more pay for social workers in healthcare.	1/26/2026 9:24 AM
262	This is a second career for me after working in corporate America. I felt called to do this work and help people. We need more therapists and less administrative difficulties? This work is already very hard :)	1/26/2026 9:24 AM
263	Maintain high standards for the profession.	1/26/2026 9:21 AM
264	Not sure. Need more time to think.	1/26/2026 9:20 AM
265	I would mandate a required fee for LPC-A supervision, rather than having each individual LPC-S choose the fee. This would reduce confusion and potentially reduce the number of LPC-Supervisor's that phone it in and do it just for the money. Make the fee something like 50 dollars a supervision hour, and set supervision to be done per client contact hours, not a set number each month. For example, 20 client contact hours for one supervision hour, and at least 2 supervision hours per month regardless of the number of client contact hours.	1/26/2026 9:20 AM
266	NA	1/26/2026 9:19 AM
267	Reduce ceu requirements. Join a national compact. Eliminate the fees for juris exam and reduce licensing fees.	1/26/2026 9:18 AM

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268	Create a section that is in less legal language for the major topics. For example, the TEA created the ARD guide for parents because they are not all attorneys. Neither are we, so something similar might lead to even better application of the Rules and Statutes.	1/26/2026 9:18 AM
269	Allow associates the ability to accept Medicaid and other insurance providers.	1/26/2026 9:16 AM
270	Telehealth guidelines	1/26/2026 9:15 AM
271	LPC-S change from 5 years to 4 years	1/26/2026 9:14 AM
272	Do not add more burden of hours for renewal of license in the future. Partially rescind associates receiving direct pay by making them reach 1500 direct client hours first. A middle ground if you will.	1/26/2026 9:14 AM
273	None	1/26/2026 9:13 AM
274	I think the Council does a great job on this to follow the legislative rules that come down. Changes need to be with our state government, not the council.	1/26/2026 9:13 AM
275	Offer plain English summaries of rule changes in the emails. It's very hard to locate the actual changes just by number and are often very difficult to understand.	1/26/2026 9:13 AM
276	I commend the Texas State Board of Examiners of Psychologists (TSBEP) for having endorsed specific Guidelines Regarding Competency in Clinical Neuropsychology. However, those guidelines are not enforceable rules and therefore do not effectively restrict licensees from advertising "neuropsychological evaluations" without meeting TSBEP guidelines for the competent practice of neuropsychology. Allowing unqualified individuals to advertise neuropsychological services is misleading to consumers, leading them to believe that they are receiving the same quality of services as they would from a provider who meets TSBEP guidelines for the competent practice of neuropsychology. TSBEP's failure to enforce these guidelines therefore poses a significant risk to public welfare. When unqualified providers advertise and attempt neuropsychological evaluations, serious errors can result, needlessly increasing associated medical costs. For example, cognitive impairment might be erroneously attributed to a brain injury or genetic condition, when in fact the patient has a treatable condition (e.g., sleep disorders, depression, etc.). In the process of a neuropsychological evaluation, failing to identify the possibility of serious yet potentially treatable conditions (e.g., normal pressure hydrocephalus, tumor, thyroid dysfunction, toxic exposures) could result in permanent brain damage or even death. To offer appropriate protections to the public, given the potential harm that can result from unqualified practice, I ask that BHEC and TSBEP establish enforceable rules consistent with their Guidelines Regarding Competency in Clinical Neuropsychology.	1/26/2026 9:12 AM
277	I would want a checklist and ease of communication for licensing.	1/26/2026 9:10 AM
278	rehaul stop the stupidity of the extralegal procedures to get money and waste my time have an actual office or person to is responsible instead of farming this out to anyone who answers the phone (not really their fault for this stupidity)	1/26/2026 9:09 AM
279	I would like to see a place where a certain amount of required supervised time (18 months) post-grad could be waived. For example, I had an advanced degree and 20+ years of professional experience before returning to pursue another graduate degree to enter behavioral health. It would have been awesome to be able to waive up to 6 months by testing on certain clinical practice features, such as a CLEP exam.	1/26/2026 9:08 AM
280	N/a	1/26/2026 9:06 AM
281	I would separate Psychology from the other professions and require doctoral training, particularly for specialty services such as neuropsychological evaluations and health and behavior assessment and intervention. I would continue to pursue reciprocity for psychologists from other states with ABPP board certification but not health services provider certification, the latter simply being a professional organization requiring little more than dues. ABPP certification requires credentialing through review of training and education and examinations.	1/26/2026 9:06 AM
282	removal of the third-party CE confirmation process. dissolving its contract.	1/26/2026 9:04 AM
283	consolidate and standardize all the masters level licenses and clarify scope of practice	1/26/2026 9:03 AM
284	As noted above,I would streamline complaint procedures, particularly for supervisors	1/26/2026 9:03 AM

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285	n/a	1/26/2026 9:02 AM
286	It often seems as though the board is designed to solely restrict and discipline license holders. I understand that the goal of the board is to protect the public but I would do that by having rules and also by helping licensees be successful. Form committees comprised of psychologists to figure out what the board can offer us by making our lives easier instead of more difficult. Then implement whatever suggestions are feasible.	1/26/2026 9:02 AM
287	Create reciprocity of practice (i.e., if you can do X in practice in another state, you can do X in TX). Allow TX psychologists to involuntarily admit patients to hospital until psychiatrists can sign off on the admission.	1/26/2026 9:01 AM
288	I would be satisfied with what had worked. Why fix something that is not broken?	1/26/2026 9:01 AM
289	I would change and or eliminate the jurisdiction laws that prevent tele-health services from being accessible to individuals worldwide.	1/26/2026 9:00 AM
290	Na	1/26/2026 8:57 AM
291	Hire investigators that have degrees in mental health, not people with no education or experience in this field. Have the entire board take a remedial course in ethics. Investigate complaints in a timely manner.	1/26/2026 8:57 AM
292	Clarification of professional policy and procedures to public, licensees and legislators	1/26/2026 8:57 AM
293	I can't think of any	1/26/2026 8:54 AM
294	N/a	1/26/2026 8:54 AM
295	I can't think of any, which I guess is one of various reasons why I will never be in charge. The rules make sense and the Council is professional about forming and enforcing them.	1/26/2026 8:54 AM
296	Staff to be able to present in a forum setting for current and upcoming issues to the licensees.	1/26/2026 8:54 AM
297	Auto reviews for upgrades done within 24 months. Some LBSW get licensed to get jobs. They usually work while getting education for MSW.	1/26/2026 8:53 AM
298	I don't have any suggestions	1/26/2026 8:52 AM
299	We need to have licensing procedures and requirements that are consistent with other states so there are not barriers to practice between states.	1/26/2026 8:52 AM
300	The first thing I do would be to fix the CEU website and make it more easy for therapist. We're under enough stress as it is and the website you have chosen is not very supportive. I also would not permit associates to get paid. I remember being associate, and not knowing as much as a full-fledged therapist. I think it's dangerous to put associates at the same level as a fully licensed therapist. I also think that the required CEUs, by the state of Texas, should be absolutely free, including the jurisprudence exam. Our compensation structure does not allow for cost of living raises, so each year we lose money. And there's so much more I'm not gonna go into right now in the interest of my personal time.	1/26/2026 8:52 AM
301	Times have changed so rules for licensing should change as well.	1/26/2026 8:52 AM
302	I just wish the language did not have to be so legal and more in Laymans terms.	1/26/2026 8:51 AM
303	None that I know of at this time.	1/26/2026 8:48 AM
304	Na	1/26/2026 8:47 AM
305	Honor gender choices. Protect the rights of all persons. Have licensed social workers more involved with rule determination that excludes political influence.	1/26/2026 8:47 AM
306	I'd make it very clear to all mental health license holders that bigotry against lgbtqia+ people is against our ethical code. I would make conversion therapy illegal.	1/26/2026 8:46 AM
307	I would make the continuation education process more clean cut and easier to understand. There are way too many nuances in the avenues in which we can get CEUs. It just needs to be simplified and the language needs to be clearer.	1/26/2026 8:45 AM
308	I would lighten the requirements of renewal such as ceus for those who have been practicing for over 10 to 15 years and have a good reputation in the community without any complaints or	1/26/2026 8:45 AM

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	discipline.	
309	See #18	1/26/2026 8:44 AM
310	Email replies within 48 hours policy, making sure that the response is personalized to the specific question, not just directing the individual to a general document.	1/26/2026 8:44 AM
311	If funding was not an issue, I would hire more investigators.	1/26/2026 8:43 AM
312	While I like this question, I don't know enough about the ability of the Council to make changes. Is it equivalent to the teachers in public schools who are doing amazing work but it doesn't matter how great they are b/c the higher people are taking their money away? Or no control over book banning, etc.? How much power and say does the council get in representing the therapists in this state?	1/26/2026 8:42 AM
313	I would work harder to complete the work to allow licenses to cross state lines.	1/26/2026 8:41 AM
314	NA	1/26/2026 8:41 AM
315	NA	1/26/2026 8:40 AM
316	Mandated course reviewing TAC for my licensure. Not allowing for 2 supervisors for LPC-Associates without mandating meetings between the supervisors.	1/26/2026 8:40 AM
317	Clearly explain when a clinician can take both the jurisprudence and human trafficking exams.	1/26/2026 8:40 AM
318	I would limit the practice of psychology to psychologists. If the council is intent on continuing to permit master's level clinicians to do psychological testing, they should be expected to complete an additional degree, supervision, and examination focused on interpretation of psychological testing. A process parallel to what is expected for prescriptive privileges for psychologists in the 8 states and federal statutes that currently permit it. I would also advocate for higher pay bands for psychologists.	1/26/2026 8:40 AM
319	I want to see the LCDL license consolidated under the BHEC as it is a Psychology license and should not be under THHS.	1/26/2026 8:40 AM
320	Improve the website. It crashed 6 times while I was attempting to upload my CEUs. There's no reason the website should function this poorly in 2026. I'd pay more to renew to support an improved website.	1/26/2026 8:39 AM
321	Better differentiate between an LPC's limitations and a LCSW's limitations.	1/26/2026 8:38 AM
322	Carefully re-examine the process with CE Broker: accuracy in recording CEU information & documenting when it is completed.	1/26/2026 8:38 AM
323	clear and concise language. strict guidelines with regard to psychological testing. Licensees must have a brochure with their license (similar to LPA) for LSSP and other non psychologist doctorates explaining the difference between a master level clinician, a licensed clinical psychologist, and etc. There is too much room for confusion and error with the public that a licensee does not explain.	1/26/2026 8:36 AM
324	the areas stated above. interstate agreement for license. upgrade for CE reporting	1/26/2026 8:35 AM
325	Giving people the autonomy to take courses that pertaining to their interest, which also falls under the licensing guidelines, rather than mandate.	1/26/2026 8:35 AM
326	if the complaint can not be addressed within a year, it needs to be dropped. After that long a time, memory is impaired, and allows the member to move forward with reciprocal license, etc... vs freezing them until indefinitely.	1/26/2026 8:34 AM
327	I would keep the amount of hours required and keep the supervision, but I would allow it at a work place. The same way LPC's can have the title of LPC-A and get paid for their hours. There should be something similar for LMSW's.	1/26/2026 8:34 AM
328	Recopical licenses	1/26/2026 8:33 AM
329	Lower the ceus.	1/26/2026 8:31 AM
330	None	1/26/2026 8:30 AM
331	Na	1/26/2026 8:30 AM

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332	Clarity and organization of website materials. Improved staff communication. Myself and colleagues have found it challenging to navigate and know what the expectations are. We've also all had issues with the professionalism and general kindness of staff communication.	1/26/2026 8:30 AM
333	I would split the licensing boards and do away with the BHEC returning the professional licensing to manage itself.	1/26/2026 8:29 AM
334	If someone fails the exam more than twice, I'll give them the option to obtain more hours to get their license. I'll reduce the test questions as well.	1/26/2026 8:29 AM
335	Not sure would have to consider	1/26/2026 8:28 AM
336	Continue to look at the day in and day out role of providers and the variation of needs per population. Definitely would not removing the licensed board members from the disciplinary settlement.	1/26/2026 8:27 AM
337	Gosh, I'd replicate what y'all do in Texas for Illinois. Just having an LPC Rulebook is so very valuable.	1/26/2026 8:27 AM
338	Not sure	1/26/2026 8:26 AM
339	Reduce financial burden on new clinicians. Join the interstate. Counseling Compact. Allow LPC Associates to bill Medicaid.	1/26/2026 8:26 AM
340	State requirements match cacrep standards, require cacrep accreditation of education. Reinstate multicultural competency education. Require bhec management to be licensed mental health professionals themselves. Enter the ACA counseling compact for license reciprocity	1/26/2026 8:26 AM
341	N/A	1/26/2026 8:25 AM
342	None, I think it's important for us to demonstrate a thorough knowledge of our practice in order to obtain licensure. It would be reckless and irresponsible to change that process and testing.	1/26/2026 8:24 AM
343	Accountability for LPC Supervisors to ensure proper supervision occurs	1/26/2026 8:24 AM
344	Streamline licensing, CEUs process	1/26/2026 8:23 AM
345	Unsure	1/26/2026 8:23 AM
346	See previous comments	1/26/2026 8:21 AM
347	Recommendation for how long LCSW-S must keep supervisee records following completion of supervision.	1/26/2026 8:20 AM
348	Look to Washington State on reimbursement.	1/26/2026 8:20 AM
349	I'm not sure.	1/26/2026 8:19 AM
350	NA	1/26/2026 8:19 AM
351	None	1/26/2026 8:18 AM
352	Provide access to cheaper CEUs	1/26/2026 8:17 AM
353	No thoughts.	1/26/2026 8:17 AM
354	N/A. Everything is solid!	1/26/2026 8:16 AM
355	Id would work hard so that Texas joins signs the counseling compact	1/26/2026 8:14 AM
356	n/a	1/26/2026 8:14 AM
357	None	1/26/2026 8:13 AM
358	N/A	1/26/2026 8:12 AM
359	Unsure	1/26/2026 8:11 AM
360	I would create a system that had several avenues to becoming a supervisor for each of the licenses in Texas. Currently, in order to become a LMFT-Supervisor, one has to have accomplished an additional 3000 hours of direct services, post licensure, and must have had the license to practice as a LMFT for at least 3 years, post upgrade; for the LPC license, the	1/25/2026 4:23 PM

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current rules are different- one has to have had at least 3000 hours of direct services post upgrade and have been in practice for at least 5 years-post upgrade. If there was an exception for license holders from either license for practitioners who held higher professional degrees such as Ph.D., ED.D, or PSYD to become supervisors sooner; our state could be addressing the supervisor shortage that has begun and will continue as more of our colleagues in the Baby Boomer generation and earlier Generation X colleagues retire from our professions.

361	N/A	1/25/2026 3:53 PM
362	I would not use an online CE Broker, such as has recently been instituted (PropelUS CE Broker) to track CEs. The basic program offers no advantage to my keeping a spreadsheet to track my accumulating CEUs. The previous process of submitting CE certificates based on a random selection of renewal candidates was sufficient and ultimately required less time commitment than the new CE Broker system.	1/25/2026 12:44 PM
363	NONE	1/24/2026 6:58 AM
364	Again... License Reciprocity Return on Investment Burnout Low Wages/Income Complaints/Disciplinary Actions	1/23/2026 8:05 PM
365	I would first make the guidelines regarding competency in clinical neuropsychology enforceable rules and restrict the terms neuropsychologist and neuropsychological evaluation to those individuals who have demonstrated competency in clinical neuropsychology. I think ultimately states that have a specific specialty designation of neuropsychologist as a separate license designation is the best way of protecting the profession and consumers, and I would change licensing to have a specific credential review process for a sub-designation as a neuropsychologist (that would require an APPCN fellowship or two years of specialty post-doctoral training with adequate supervised training in neuropsychological practice, neuroanatomy, and neuropsychological specialty didactics training). This would require there to be other designated specialties as well, but I think this would be much better than a single license as a psychologist. I would not be competent to practice in I/O, developmental, or counseling contexts and would hope that there would be a way for the public to know that I am not specifically trained for those activities (should I for some reason start to claim that I am an expert in these areas and try to get people to pay me for these services).	1/23/2026 1:11 PM
366	Statute - Pass an interstate counseling compact;	1/23/2026 12:57 AM
367	Have enforceable rules and regulations regarding the definition of a neuropsychologist. I commend the Texas State Board of Examiners of Psychologists (TSBEP) for having endorsed specific Guidelines Regarding Competency in Clinical Neuropsychology. However, those guidelines are not enforceable rules and therefore do not effectively restrict licensees from advertising "neuropsychological evaluations" without meeting TSBEP guidelines for the competent practice of neuropsychology. Allowing unqualified individuals to advertise neuropsychological services is misleading to consumers, leading them to believe that they are receiving the same quality of services as they would from a provider who meets TSBEP guidelines for the competent practice of neuropsychology. TSBEP's failure to enforce these guidelines therefore poses a significant risk to public welfare. When unqualified providers advertise and attempt neuropsychological evaluations, serious errors can result, needlessly increasing associated medical costs. For example, cognitive impairment might be erroneously attributed to a brain injury or genetic condition, when in fact the patient has a treatable condition (e.g., sleep disorders, depression, etc.). In the process of a neuropsychological evaluation, failing to identify the possibility of serious yet potentially treatable conditions (e.g., normal pressure hydrocephalus, tumor, thyroid dysfunction, toxic exposures) could result in permanent brain damage or even death. To offer appropriate protections to the public, given the potential harm that can result from unqualified practice, I ask that BHEC and TSBEP establish enforceable rules consistent with their Guidelines Regarding Competency in Clinical Neuropsychology.	1/22/2026 8:05 AM
368	Less meetings, join the compact, more surveys asking for more information regarding the everyday struggles.	1/22/2026 7:09 AM
369	Establish guidelines for competent practice of specialties within mental health care, especially neuropsychological assessments.	1/21/2026 7:58 PM
370	Stricter rules about specialty practices, especially specialties in psychology which REQUIRE postdoctoral training, like neuropsychology.	1/21/2026 5:06 PM
371	I commend the Texas State Board of Examiners of Psychologists (TSBEP) for having	1/21/2026 5:02 PM

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endorsed specific Guidelines Regarding Competency in Clinical Neuropsychology. However, those guidelines are not enforceable rules and therefore do not effectively restrict licensees from advertising “neuropsychological evaluations” without meeting TSBEP guidelines for the competent practice of neuropsychology. Allowing unqualified individuals to advertise neuropsychological services is misleading to consumers, leading them to believe that they are receiving the same quality of services as they would from a provider who meets TSBEP guidelines for the competent practice of neuropsychology. TSBEP’s failure to enforce these guidelines therefore poses a significant risk to public welfare. When unqualified providers advertise and attempt neuropsychological evaluations, serious errors can result, needlessly increasing associated medical costs. For example, cognitive impairment might be erroneously attributed to a brain injury or genetic condition, when in fact the patient has a treatable condition (e.g., sleep disorders, depression, etc.). In the process of a neuropsychological evaluation, failing to identify the possibility of serious yet potentially treatable conditions (e.g., normal pressure hydrocephalus, tumor, thyroid dysfunction, toxic exposures) could result in permanent brain damage or even death. To offer appropriate protections to the public, given the potential harm that can result from unqualified practice, I ask that BHEC and TSBEP establish enforceable rules consistent with their Guidelines Regarding Competency in Clinical Neuropsychology.

372	Board rules regarding the protection and exchange of raw psychological test data and materials should be revised to be in accordance with the multitude of guidelines and inter organizational practice statements from neuropsychological organizations to prevent the unauthorized access of raw test data and inappropriate disclosure of raw test data, especially in legal proceedings. The current rules are ambiguous and need revision to enhance the protection of the practice of psychology and the test materials and data we rely on to practice psychology.	1/21/2026 4:01 PM
373	Include proposed rule information at start of BHEC listening hours. Be mindful of adding increased reporting and paperwork to clinicians and supervisors and be able to clearly identify how it benefits protection of public. Get feedback from either professional associations or identify current members to serve as in an advisory capacity to provide feedback on potential implications for proposed rules.	1/21/2026 2:08 PM
374	n/a	1/20/2026 2:39 PM
375	Keep changes to a minimum and only when necessary.	1/20/2026 1:41 PM
376	Streamline process for military psychologist license renewals.	1/18/2026 2:30 PM
377	It would likely help signify the difference in training and qualifications for psychologists to be separate from BHEC.	1/18/2026 1:24 PM
378	Reinstate language in board rules that protect all humans.	1/18/2026 11:27 AM
379	See all of my above statements.	1/18/2026 11:12 AM
380	NA	1/18/2026 11:05 AM
381	I think you all are doing a good job.	1/17/2026 3:12 PM
382	I would create a system to help match supervisors with licensees and possibly a face to face interview for applicants before providing a license. There are several ethically and educationally questionable professionals that decrease the respect and professionalism of the field.	1/17/2026 1:38 PM
383	I would immediately change the rules around associate supervision.	1/16/2026 6:20 PM
384	See above	1/16/2026 3:00 PM
385	Promote need for more mental health funding.	1/16/2026 12:19 PM
386	I would do more of what TSBEP did before.	1/16/2026 11:50 AM
387	I'll have to reflect on that too!	1/16/2026 8:56 AM
388	I would try to make it more accessible and approachable - create a plain language version that is less "legal speak"	1/15/2026 10:43 AM
389	I would like to see a more public facing system for disciplinary actions taken against providers.	1/14/2026 9:42 PM
390	Bring back the expectation that a set number of CEUs for LCSW renewal include culturally	1/14/2026 8:40 PM

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responsive and culturally aware practice.

391	I would recommend revisiting the Council's \$50 gift rule. I understand and support the intent behind this policy, particularly as a safeguard against boundary violations and the misuse of power in the therapeutic relationship. In situations where a counselor might act unethically or exploit a power differential, clear limits on gifts are necessary and appropriate. That said, the current dollar amount appears somewhat antiquated and may not reflect contemporary economic realities or align with standards in many other professional fields. As written, the rule can unintentionally restrict culturally normative or benign expressions of appreciation that do not pose an ethical risk. If the Council determines that the rule should remain in place, I would suggest considering an increase to the allowable amount and providing clearer guidance that emphasizes clinical judgment, cultural context, and intent rather than a rigid monetary threshold alone. Updating the rule in this way would preserve its protective purpose while allowing for greater flexibility and cultural responsiveness in practice.	1/14/2026 4:12 PM
392	Those with senior status should have renewals less often.	1/14/2026 4:08 PM
393	I would change the board's lack of acceptance of the social work licensure compact to become a part of it. We are already short on mental health professionals, and this would provide more opportunities to encourage qualified individuals to come to a state in dire need of these folks.	1/13/2026 9:36 AM
394	can't to ensure response times are appropriate	1/13/2026 8:38 AM
395	This is a loaded question	1/13/2026 8:01 AM
396	encourage CEUs and support for diverse populations (racial, cultural, sexuality, gender)	1/12/2026 7:01 PM
397	The Interstate Compact would get resolved such that so long as the clinician is licensed in the state in which they are physically located when providing services they are abiding by their licensure laws, regardless of the physical location of their client. That way when my client is on vacation in Florida and I am still in Texas, we could have a telehealth session to best support their needs while they're away.	1/12/2026 6:06 PM
398	1. I would make a portal where all documentation for supervision could be in one place (or update online licensing system), accessible for the Supervisor, LPC-Associate, and BHEC. This would make the process of licensure & upgrade, more efficient & organized. All necessary forms could be documented electronically. Any other necessary forms could be uploaded. 2.I would ensure consistent communication was sent out to all licensees, not just those subscribed to receive emails from BHEC, especially regarding important legislative updates. A regular newsletter would be helpful.	1/12/2026 5:39 PM
399	Include better rules related to telehealth to ensure safety for both clients and counselors. Telehealth is not about convenience but about what is in the best interest of the client. With the advancement of AI, address ethical codes about the use of AI especially related to treatment planning.	1/12/2026 10:27 AM
400	See above.	1/12/2026 9:22 AM
401	I would resume sending certificates of renewal each renewal automatically and free of cost to each member.	1/11/2026 12:57 PM
402	If I were in charge, I would not make any changes to the Council's statutes, rules, or processes.	1/10/2026 11:45 AM
403	we should be able to practice in multiple states similar to nursing. no more state limitations	1/9/2026 12:03 PM
404	Compare TX standards with those of all other states, not just OK and LA. There is a regional problem in this part of the country where less qualified masters level counselors are flooding the market with substandard care. Consumers are not being protected by gatekeeping measures. Master's level training programs in TX need to improve.	1/8/2026 7:21 PM
405	Being out of state, I don't know TX as well as my home state. My biggest goal would be implementation of the Counseling Compact	1/8/2026 12:56 PM
406	I would have more representation and input from actual clinicians across various parts of the state and healthcare setting and less staff who have never been on the frontlines	1/8/2026 11:20 AM
407	Allow and participate in multi-state licensing! Allow therapists to do telehealth with pts who are in other states, or temporarily in other states (critical for more acute clients who may be travelling but who still need support)	1/8/2026 10:56 AM

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408	Join the group of states in the US that have reciprocity of licensure and allow services to be provided across state lines.	1/8/2026 10:35 AM
409	I would implement an easier process for obtaining a professional license in other states after obtaining one in the state you reside in. It would be wonderful to qualify for a license that covers a region across multiple states rather than just one. I would also offer more free CEU's, especially the ones that are baseline required by everyone to take. I would also implement more political advocacy from the board when it comes to policy that impacts our profession and clientele.	1/8/2026 10:32 AM
410	If I were in charge, the changes I would make are: 1. I would revise the rule that allows LPC Associates to open and operate their own practices. Associates need protected clinical development time, not the pressure of running a business before they have a solid clinical foundation. This change would improve community safety and ensure that new clinicians receive the depth of supervision they need. 2. I would work with the state and community members to create a structure that supports sustainable supervision. Supervisors and supervisees should be able to collaborate to develop scholarship programs, stipends, or financial support for supervision. I would also explore incentives for supervisors, such as reduced renewal fees or access to continuing education and training, so they can offer high-quality supervision at lower costs. 3. I would require the Council to meet clear, enforceable timelines for responding to complaints. Slow complaint processes erode public trust and create the perception that therapy is unregulated or unsafe. Timely responses are essential for accountability and community confidence. 4. I would remove policies that funnel clinicians toward large corporate CE providers. Community-based educators and smaller training organizations offer culturally grounded, locally relevant education that better serves Texas communities. The current system disadvantages these providers and narrows the field in ways that do not support equity or quality. 5. I would increase transparency and professionalism in board operations. Consistent, respectful communication and clear, complete answers to stakeholder questions are essential. The current inconsistency in communication undermines the profession and creates confusion for students, supervisors, and community members.	1/8/2026 10:07 AM
411	I would change the LPC Associate hours to 1,000 and 1,000 instead of 1500 and 1500.	1/8/2026 10:04 AM
412	Hire more investigators to work complaints against a licence; have a board member hired from the community by popular vote	1/8/2026 9:41 AM
413	One or two times a year announce rule changes that are effective in 3-6 months	1/8/2026 8:38 AM
414	I would like to see the Council be an avenue we can utilize to quickly and effectively offer volunteer services (counseling) to people affected by natural disasters or catastrophic events in Texas. Furthermore, it would be nice to have reciprocity with other states to be able to offer telehealth services to folks who suffer from catastrophic events in other states, as well, instead of having to contact each affected state individually to see what their individual requirements for offering volunteer services would be.	1/7/2026 11:56 PM
415	Free online exam for required CE courses such as multicultural and sex trafficking	1/7/2026 11:10 PM
416	I would review the statutes and rules governing therapists doing psychedelic medications for enjoyment.	1/7/2026 5:43 PM
417	Counseling Compact. Help LPC-As find supervisors more easily. Require treatment centers and inpatient hospitals to have in-house supervisors if they are to employ LPC-As.	1/7/2026 5:04 PM
418	Fewer CEUs per renewal cycles	1/7/2026 3:04 PM
419	Counseling compact with all 50 states, or make it ok to work with clients while they are in another state	1/7/2026 1:53 PM
420	Please keep doing consistent reviews and adjusting as necessary.	1/7/2026 1:03 PM
421	N/A	1/7/2026 12:27 PM
422	Increased client advocacy for marginalized and under served populations by the council to the legislative branch	1/7/2026 10:41 AM
423	Count the direct hours collected during college supervision toward the 1500 hours. Stress a supervisors role is not to use associates to build their own practice and for their own financial gain. This would increase the amount of mental health workers and enforce ethical practices	1/7/2026 9:12 AM

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	for supervisors. It would also raise morale for associates. It's very low right now. We can't even make a living wage while trying to pay off our student loans. That is shameful to the profession.	
424	For LSP, the not being allowed to quit without 45 days notice of the first day of school. That is ridiculous and might force districts to provide better working conditions and workload if people could leave.	1/7/2026 8:20 AM
425	If I were in charge, I would advocate for state reciprocity across all licenses and make the rules easier to access and understand.	1/7/2026 6:13 AM
426	Require at least 1 hour CEU on Crisis Management/Suicide/NSSI intervention. We have a suicide crisis and I come across professionals who get freaked out by it and do not respond appropriately to crises. As a LPCS since 2003, I am also concerned with Associates practicing in their own offices, isolated from other counselors, and without an onsite supervisor.	1/7/2026 1:55 AM
427	Consolidate when changes are made to be on a schedule so that it's easier to stay on top of any major changes periodically	1/6/2026 7:00 PM
428	none	1/6/2026 6:59 PM
429	I would not waste money coming up with a Texas exam for the practice of psychology in the state of Texas. If you can't pass the national exam then practice as a master's prepared therapist. Dumbing down requirements does not protect the public.	1/6/2026 3:54 PM
430	NA	1/6/2026 3:10 PM
431	Clarify CEU requirements the broker system recently implemented does not appear to accept credit for some of the overage trainings, also would give more credit for licensees providing training. Some trainings I do are 2-3 days and take 12-16 to create the presentation and materials.	1/6/2026 2:17 PM
432	Easier communication	1/6/2026 1:49 PM
433	None at this time	1/6/2026 12:00 PM
434	Updates to rules would be more clearly provided. We shouldn't have to dig through and compare rules to view changes. Context and expectations should be transparent and logical.	1/6/2026 11:22 AM
435	I suspect the council is compromised which compromises CEU topics and thus only a select few of presenter applications for conferences limits the exposure of practitioners to fresh topics and a large expanse of topics.	1/6/2026 9:22 AM
436	N/A	1/6/2026 8:24 AM
437	I would ensure more alignment with graduate programs and the test.	1/6/2026 1:07 AM
438	The price of the exams, the length of time of the exam, and all of the exams you have to take before you can become fully licensed	1/6/2026 12:21 AM
439	Recognition of other states' degrees and credentials. My EdS degree was not recognized by TX at all and it took several months to finally gain LPC reciprocal licensure. There was only 1 woman who actually understood my credentials and she had to advocate for me tremendously.	1/5/2026 11:17 PM
440	Another BIG question that requires more thought than a quick survey allows time for.	1/5/2026 8:42 PM
441	Listen to people in the trenches. Introduce ways to enhance self-care while working 40+ hours to meet economic demands. Advocate for increased managed care rates. Increase awareness of what we do and the importance of it.	1/5/2026 8:02 PM
442	The new CEUs approval and logging of CEUs	1/5/2026 6:22 PM
443	Display of license in specific facilities due to the lack of ability for clinician to put things on walls where patients see and have access to information	1/5/2026 4:51 PM
444	I would keep doctoral level psychologists licensing and rules separated from other lower level professionals.	1/5/2026 4:11 PM
445	Speak more clearly on whether CEU's need to be face-to-face or online.	1/5/2026 4:09 PM
446	Keep legislators out of making the rules - such as the new way of reporting CE or PD	1/5/2026 3:22 PM

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447	Separate psychology, as it had been, with its own board.	1/5/2026 3:11 PM
448	I would prepare counselors on AI use because it is becoming more common to seek help through those resources.	1/5/2026 2:46 PM
449	Provide safeguards against prejudices toward licensees who are conservative and Christian. The shift in culture toward a more liberal relative thinking has the potential to not tolerate and vilify the more conservative position.	1/5/2026 2:36 PM
450	More user friendly terms. I didn't want to be a lawyer. I want to be a counselor, not trying to figure out new requirements constantly.	1/5/2026 2:29 PM
451	If I were in charge, I would modernize the **Texas Behavioral Health Executive Council** statutes and rules to allow limited continuity-of-care telehealth for Texas residents who are temporarily out of state, reducing harmful treatment disruptions. I would also streamline licensure and supervision processes by simplifying documentation, increasing transparency around timelines, and funding paid supervised placements, because these changes would protect clients, reduce clinician burnout, and strengthen the long-term workforce.	1/5/2026 2:25 PM
452	N/A	1/5/2026 2:16 PM
453	Continue the same level of operation...	1/5/2026 2:12 PM
454	Alternative(s) to taking the EPPP to receive a license.	1/5/2026 1:33 PM
455	N/A I don't know as I haven't even completed a full licensed year.	1/5/2026 12:53 PM
456	I would make them more clear and easier to understand. I would also make them more aligned with the ethics of the different professions served by BHEC. I would also join the compact with other states so a Texas license holder could practice in other parts of the country.	1/5/2026 12:21 PM
457	I am a LP and and was licensed in 2 other states. There is no LSSP degree in those states or any state that I have lived. My training and experience align with the LSSP license however, there is no easy path for licensure; there should be some type of alternative pathway for those of use with relevant training and experience.	1/5/2026 12:08 PM
458	Rules committee meetings and complaints processes both need increased transparency. Closed rule committee meetings with no outside input is why we are in the oversaturation mess now. Rules needs to make sure we are not sacrificing quality for quantity. We need to incentivize rural populations to become mental health professionals and serve their communities.	1/5/2026 12:03 PM
459	I would emphasize strong movement on the counseling compact and the issues noted above in my response to question 19.	1/5/2026 11:54 AM
460	N/A	1/5/2026 11:42 AM
461	The state and federal bureaucratic system is beyond repair, inflexible, and incapable of change.	1/5/2026 11:41 AM
462	Unknown.	1/5/2026 11:31 AM
463	unsure	1/5/2026 10:59 AM
464	I would not change how we inform our communities about what we do. We are hear to help different cultures, populations and groups. I would be sure to take a stand against anyone or thing that hinders the work that we do.	1/5/2026 10:50 AM
465	changes have been made to clean them up, however this process could be expedited. I also wish it was easier to find information in the statutes - the wording is also not helpful.	1/5/2026 10:46 AM
466	Statutes are written in "bureaucratese." This seems to be the cultural norm for regulators and politicians. The single greatest improvement of the statutory and regulatory environment would be to require that they be written in plain english, preferably at a low high school level. Additionally, the full transparent documentation of the council's processes, not limited to licensure and renewal in graphic form, would be good. Finally, an automated process workflow that stepped licensees through the processes and kept the licensee aware of completed steps and status on an ongoing basis. This would greatly modernize the system and reduce the number of unnecessary and redundant contacts to the council.	1/5/2026 10:31 AM
467	Read previous answer in 23.	1/5/2026 10:06 AM

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468	Improve communication	1/5/2026 9:42 AM
469	NA	1/5/2026 9:40 AM
470	Ensure supervision practices are equitable between part-time and full-time associates.	1/5/2026 9:34 AM
471	I would include a member of each discipline in every board meeting and representing each discipline honestly, that may already be happening and I'm just not aware of it; I would do a way with the CE tracker and go back to the simple way, whereby licenses keep track of their own and provide if called upon to do so	1/5/2026 9:32 AM
472	Fewer rule changes related continuing education requirements.	1/5/2026 9:27 AM
473	N/A	1/5/2026 9:24 AM
474	not sure	1/5/2026 8:44 AM
475	I would not have social workers sit and pay for Licensing for Master's and then Clinical. I would have the hours from the supervising clinician as proof of education in this area. The Master's exam is enough to prove that we have the knowledge in this area. It would save time and money and help more LMSWs get into the clinical field.	1/5/2026 8:38 AM
476	Remove the category requirements of CE	1/5/2026 7:19 AM
477	The ability to hold a license in multiple states. Living on the border of two states comes with challenges for both clients and providers.	1/5/2026 5:45 AM
478	I don't really feel it's necessary to retake the jurisprudence exam every time we need to renew our license. However, at least it's easy to pass.	1/4/2026 10:11 PM
479	Why so many categories of social work? Sometimes it feels like the profession is trying to take on the role of psychologist or blurring the difference between an LPC and social worker! An LPC? Really?	1/4/2026 8:57 PM
480	I would make rules and policies with explicit support for those most affected by prejudice, particularly the Black community and transgender community, but also all gender, sexuality, and race minorities as well as disabled people.	1/4/2026 8:55 PM
481	I don't know of any.	1/4/2026 7:42 PM
482	I am a retired Play Therapist, closing my practice in 2021. I have files from clients that i am required to keep until 2042. I will be 81 and hopefully still around, but I couldn't possible remember any details about those 3 or 4 year old clients that far down the road. Why do I have to keep those files? The calculation should be more reasonable. Keeping files 20 years is ridiculous!! Possibly 10 years total would be reasonable. If a parent doesn't come looking for their child's old files within 10 years, then there's a good possibility they won't at all.	1/4/2026 7:19 PM
483	I think you guys do an amazing job. Thank you!	1/4/2026 6:56 PM
484	I would make it easier for counseling Supervisors from other states to transfer their supervisor credentials to Texas. I would also make sure that Texas requirements are aligned with other states and join an interstate compact.	1/4/2026 6:11 PM
485	I would like to see a single payer system for health care so those in need could receive services. I would also like to have rules and regulations that are more accommodating to see clients regardless of state borders.	1/4/2026 5:08 PM
486	I would require Supervisors, as part of their supervision fee, to provide a certain number of clients to their supervisee; at present not all Supervisors do that (typically only those in group practices do). i would allow Associates to utilize Supervisors outside of Texas because the basic function of a supervisor is for theory and practice, not law. We already take a jurisprudence exam to identify our knowledge of state law. by limiting us to only Texas LPC-S's you limit our ability to access Supervision by those who may be most qualified to guide is in our orientations; such as Gestalt, Jungian, Adlerian, etc; not all states have equal access to these qualified Supervisors. I would reduce the minimum amount of time necessary to complete supervision to 12 months, rather than 18. I doubt there is any significant research that indicated a clear benefit to the additional 6 months. I would remove the 5 year limitation on romantic relationships with previous clients in Texas and make it forever; a clinician should NEVER have a romantic relationship with someone who was their client.	1/4/2026 4:19 PM

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487	N/A	1/4/2026 4:07 PM
488	Make communications with members much more straightforward, advocate with insurance companies more strongly, provide more public health level information broadly about what makes a psychologist better than an AI chatbot	1/4/2026 3:26 PM
489	clearer communication on steps to get something done (be more explicit, granular in your instructions)	1/4/2026 3:05 PM
490	Uphold the highest standards and not homogenize the professions as they are different.	1/4/2026 3:04 PM
491	I would do more to clarify 1099 and W2 statuses for counselor in such a way that it makes it easier and less complicated for both the employee and contractor to determine what we want to work as. I feel like practices are being forced to hire counselors as w2's these days when 1099 should be an option without fear of incorrectly categorizing someone. Not sure how much the counsel can do about this but it is an issue I am hearing and that concerns me as I hope to grow my practice by adding contractors and w2 employees in the future.	1/4/2026 2:41 PM
492	Shorter wait times, shorter application processing times when/if there is a potential error.	1/4/2026 2:35 PM
493	Join the compact	1/4/2026 1:59 PM
494	None	1/4/2026 1:36 PM
495	Get on board with the interstate compact	1/4/2026 12:46 PM
496	I would probably stop making changes that create more unnecessary work for a field of practitioners that are already overworked, generally underpaid, and are burning out.	1/4/2026 11:06 AM
497	I would decrease the number of questions on licensure exam.	1/4/2026 10:34 AM
498	Unsure	1/4/2026 10:13 AM
499	Easier access to staff, info & licensing requirements. I thought I was done at least 3-4x.	1/4/2026 10:03 AM
500	Participation in an interstate compact or similar group. Given the current realities of video communication and frequency of client travel, it makes no sense that laws would restrict me from seeing a client who happens to be traveling in another state for work or a vacation.	1/4/2026 9:47 AM
501	More oversight of LPC Associates	1/4/2026 7:43 AM
502	More regulation around KAP services (I attended the most recent meeting & it sounded like this was the majority opinion). I'm sure there are many other things I would change, but I'm not sure at this very moment.	1/4/2026 4:44 AM
503	First of all I would include intelligent and knowledgeable Thetaists to be part of the Board of LMFT. Therapists that have been working with hard cases, therapists that have empathy and compassion for their fellow colleagues.	1/4/2026 1:42 AM
504	A licensee could call in and get input or clarification from the board about their own rules that they make without being told we can't interpret the rules for you ... please consult a lawyer? Really? No attempts to help licensees manage risk by trying to consult with the board about processes or ethics	1/3/2026 11:57 PM
505	I'd influence APPIC to allow for providing PsyPact services no matter what state you are in at the time of service.	1/3/2026 9:03 PM
506	see above	1/3/2026 7:57 PM
507	Less "global"	1/3/2026 7:01 PM
508	Right now, none per se. I would keep the licensure regulation focused on quality of care and not vacillating trends.	1/3/2026 5:58 PM
509	Unsure	1/3/2026 5:53 PM
510	I would make it easier for retired (in good standing) LPC's to be able to reactivate their licenses with out undue financial burdens.	1/3/2026 5:24 PM
511	I would find ways to protect those most current vulnerable populations from harm. I would explore the colonial roots of western psychology and work to increase ways to integrate	1/3/2026 4:45 PM

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indigenous healing and herbalism into current psychology practices. I would increase support for making therapy more affordable for clients while supporting clinicians making a solid living.

512	Join the counselor compact to allow more access to therapy	1/3/2026 4:23 PM
513	Nothing comes to mind at the moment.	1/3/2026 3:46 PM
514	Would not have a outside for profit company handling CE banking. Cumbersome and a conflict of interest.	1/3/2026 2:59 PM
515	BHEC support of Social Work license portability compact	1/3/2026 2:21 PM
516	None	1/3/2026 1:34 PM
517	Push the Counseling Compact more	1/3/2026 1:10 PM
518	not sure	1/3/2026 12:50 PM
519	There should not be an overarching Behavioral Health Council, but instead have individual boards for individual fields. Also, the staff is slow, hard to reach and hard to get a response from. I don't know any clinicians who appreciate the Texas Behavioral Health Council.	1/3/2026 12:41 PM
520	Clearer delineation between services of psychologist versus other types of mental health professionals.	1/3/2026 12:32 PM
521	Require classes of transitioning into this field. Many associates come in with unrealistic expectations and are not as prepared as they think. Have clearer roles defined with the IRS regarding 1099's and w-2 employees as this is often misused. Require business courses if associates are going to start their own practice before they are fully licensed.	1/3/2026 12:24 PM
522	Ease up on CEU Broker stuff. It will take me hours to enter all the stuff I've done, find proof, etc. Also, make it easier to know changes to rules up front as stated earlier.	1/3/2026 12:23 PM
523	Under the new test interim make it possible for those that received 400 - 499 on EPPP to be licensed.	1/3/2026 12:01 PM
524	Ensure safety of all social workers, set a minimum wage	1/3/2026 11:00 AM
525	None	1/3/2026 10:53 AM
526	Fees keep increasing so I would find a way to keep them affordable	1/3/2026 10:03 AM
527	Consider telehealth services licensure to extend to neighboring States.	1/3/2026 10:02 AM
528	I would make care available to anyone once you establish services	1/3/2026 9:44 AM
529	I would disband the council and start over with people who demonstrate a fundamental understanding of ethical conduct, integrity and justice.	1/3/2026 9:24 AM
530	Every aspect of the Council needs to be rebuilt from the ground up by actual clinicians, and not people who are uneducated about and have no vested interest in the field of counseling.	1/3/2026 8:43 AM
531	I would bring back the requirements for diversity. It is integral to our competence as practitioners in this field. I would also divide the subspecialties into different boards. It does not make sense to lump us all together. Our education and often our responsibilities are in fact different. I've been quite disappointed in the changes over the recent years.	1/3/2026 8:25 AM
532	Honestly do not know. I was previously licensed in Kansas. They were more restrictive, but the regs were black and white and did not change frequently. I knew where I stood and the legislative branch was not allowed to force change.	1/3/2026 7:40 AM
533	Na	1/3/2026 6:50 AM
534	Make location of current supervision forms clearer. It SEEMS like they should be in this section: Applying for a License and Timelines .	1/3/2026 6:33 AM
535	Allow interstate licensing Increase pay standards so the licensing process is not a barrier for people	1/3/2026 6:16 AM
536	Not interested in being in charge	1/3/2026 6:04 AM
537	Texas has solid rules and statutes. There is no reason Texas couldn't join the group of states	1/3/2026 5:27 AM

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that have reciprocity so that, at the very least, we could continue to serve our clients who go off to college and don't feel comfortable starting over with a new therapist.

538	None	1/3/2026 12:00 AM
539	Please read above.	1/2/2026 11:37 PM
540	I would allow clinicians in Texas to be able to have virtual sessions with current clients when they are traveling out of state for a short period of time if the clinician feels the client is not high risk while out of state.	1/2/2026 11:32 PM
541	Why am I taking the Jurisprudence every two years	1/2/2026 11:28 PM
542	None	1/2/2026 10:57 PM
543	Allow all licensees under TBHEC who have a Masters degree, and have been supervised over 3,000 hours equivalency so they may be recognized readily with insurance companies and so they may obtain jobs to provide mental health services to the public. LPAs are not recognized and employers are requesting only those with LPC, LMFT, QMHP or LCSW. Reduce licensing fees for the LPAs (can only make about \$30/hour) and provide the public information about LPAs.	1/2/2026 10:50 PM
544	Have supervisors and associates should have a system on the website that allows us to track and sign off on hours - a spreadsheet is just so 1980s. the ceu service should also be through the website not yet another provider.	1/2/2026 9:55 PM
545	I would make it easier to provide teletherapy to clients who are mobile, nationally and internationally.	1/2/2026 8:33 PM
546	Texas would be included in the compact.	1/2/2026 7:07 PM
547	I would go back to allowing professionals (licensees) to choose all of their CEU's to fit their particular clientele & stop requiring specific topics &/or specific presenters. I would share changes in rules, etc in a different color on the document to make it easier to view & find.	1/2/2026 6:49 PM
548	Rules around people with criminal backgrounds getting licensed. I feel like social work is all about second chances but some folks aren't allowed to get licensed based on what is in their past.	1/2/2026 6:44 PM
549	I think making it more clear about the process for out of state licensed providers who are applying for Texas license	1/2/2026 6:40 PM
550	N/A	1/2/2026 6:37 PM
551	Make it easier for people to obtain reciprocity licensure.	1/2/2026 6:35 PM
552	More accountability to associates. Unions	1/2/2026 6:25 PM
553	ensure that people within the profession are not removed from the rulemaking, rule reviewing, and complaint investigation process	1/2/2026 6:23 PM
554	Clarity of our Texas responsibilities	1/2/2026 6:20 PM
555	As is true generally, your website appears to be developed by expert website developers, however, your audience is more diverse, and as a group, less competent in using websites. The same is true of the content generally, due to the use of legalese intended to defend against possible legal attacks/lawsuits. Both are barriers to communication.	1/2/2026 6:16 PM
556	Slow down the changes!	1/2/2026 6:09 PM
557	unsure	1/2/2026 5:55 PM
558	N/a	1/2/2026 5:40 PM
559	I would fight back against the profession behind removed from being called no longer a profession.	1/2/2026 5:28 PM
560	Becoming an independent agency has been the best change that could have been made. No changes necessary.	1/2/2026 5:20 PM
561	Accessibility to the council is an issue that has caused stress in the past.	1/2/2026 5:19 PM

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562	Do not have any input at this time	1/2/2026 5:08 PM
563	Remove the for-profit CEU renewal system, make rules more accessible/easier to understand	1/2/2026 5:03 PM
564	Have an advisory board of working professionals to help the council, truly advocate for the counseling compact and get it done, focus on true detriments to the profession such as unlicensed people practicing rather than placing undue burdens on those of us ethically practicing, help us rather than see us as the enemy	1/2/2026 5:03 PM
565	already stated above Drop Human Trafficking -once is sufficient Drop DEI - we do it in graduate school Stop making us make the CE providers rich telling us the same crap over and over again. Have the CE & license renewal cadence shifted to 5 years	1/2/2026 4:58 PM
566	The only changes I would make are those that would allow us to safely, ethically, and professionally be included in the compact agreement.	1/2/2026 4:52 PM
567	Supervision be free and provided by the state	1/2/2026 4:47 PM
568	My only recommendation is how to know if under audit, can it be on the same page as when renewing license?	1/2/2026 4:43 PM
569	I would explicitly state that licensees must not be under the influence of alcohol or drugs while providing counseling. I would ask for rules on the concurrent practice of counseling and coaching (as I believe this business is trying to fill the role of counseling-preventative mental health care, and is being used as a workaround for students/LPC Associates who don't want to advertise they're under supervision/those waiting on licensure).	1/2/2026 4:40 PM
570	None	1/2/2026 4:26 PM
571	Lower prices	1/2/2026 4:13 PM
572	None at this time.	1/2/2026 4:06 PM
573	N/A	1/2/2026 4:04 PM
574	I would allow a certain number of hours from teaching a psychology or psychology related course to be counted as direct hours for license.	1/2/2026 3:47 PM
575	None	1/2/2026 3:22 PM
576	Adjust Telehealth regulations to make Telehealth between states easier.	1/2/2026 3:18 PM
577	Shorten the period to 18 months for residents, 2 years to become a supervisor	1/2/2026 3:17 PM
578	Immediately eliminate efforts to suppress DES protocols. Fully fund both hotline & warm line services so they are available & no one is put on hold.	1/2/2026 3:16 PM
579	Make it easier for a licensure in Texas be valid in other states. Have a cooperative licensing agreement with other states.	1/2/2026 3:15 PM
580	I have ideas that should be codified into law, but I'm not certain of the extent to which the Council can implement the law (due to its narrow focus on regulating professionals in Texas) or if there needs to be an implementation on a national level. 1. Make AI "therapy" illegal. Developers who create "therapist" chatbots should be sent a cease-and-desist letter and a deadline, and if they don't comply, be charged and prosecuted. 2. Apply the same legal action to "life coaches," "trauma coaches," or "mental health coaches". I'm not a cruel and unreasonable person; I'm all for corrective measure before punitive measure, hence why I'm suggesting the C&D letter route. Then if they don't comply after reasonable outreach attempts, they should be charged for practicing without a license. 3. Codify laws banning Big Tech companies (or any companies handling PHI) from selling client data or using information to train AI. 4. Implement stricter LPC Supervisor vetting, sharing concerns/feedback about them, and holding them accountable.	1/2/2026 2:44 PM
581	Not sure at this time.	1/2/2026 2:34 PM
582	N/A	1/2/2026 2:21 PM
583	See above	1/2/2026 2:16 PM
584	Eliminate CEU for diversity credits for renewal licensing. I have found that these trainings can be offensive.	1/2/2026 2:06 PM

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585	n/a	1/2/2026 1:37 PM
586	Simply the whole thing	1/2/2026 1:37 PM
587	I can't think of anything.	1/2/2026 1:37 PM
588	Allowing LMSWs to own independent practice if under LCSW-S supervision	1/2/2026 1:34 PM
589	Licensure in many respects has been about gatekeeping and excluding people from the profession. But there are now avenues for some clinical or counseling psychology without licensure. One can be a life coach, for example, and just follow their personal intuition. Even AI has become a psychologist. I would prefer to exercise quality control and bring more graduates into licensure than to have strict criteria which minimize the number of professional psychologists.	1/2/2026 1:32 PM
590	None	1/2/2026 1:30 PM
591	This most likely exceeds the council's ability, but moving Texas towards joining the counseling compact would be incredible (and I believe is necessary).	1/2/2026 1:25 PM
592	To continuously make it easier to practice in our profession without being on edge because one is guilty until proven innocent. Sometimes I play it too safe, and it makes me feel like I'm walking on eggshells.	1/2/2026 1:25 PM
593	Help practitioners be able to see clients with insurance	1/2/2026 1:22 PM
594	Council members should take on the mentality of "serving" public, not rulers who are unapproachable to professionals and public alike.	1/2/2026 1:20 PM
595	I would send regular updates, in plain English (no legal jargon), regarding policy/ethical changes updates on a monthly basis and review those at the beginning of the monthly (yes, lets do them monthly) leadership listening hour.	1/2/2026 1:18 PM
596	I am not really sure about the LPC requirements for competence to be in unsupervised private practice - too many seem to have "morphed" from school counselor to "clinical practitioner" - where is their training?	1/2/2026 1:02 PM
597	a better phone system where you can leave your call back# to keep your place in the Q	1/2/2026 1:02 PM
598	None	1/2/2026 1:00 PM
599	not sure	1/2/2026 12:39 PM
600	I would encourage Council to keep doing what Council do.	1/2/2026 12:38 PM
601	To be able to practice in Texas if you no longer live there but you're still licensing	1/2/2026 12:33 PM
602	More information about CE	1/2/2026 12:28 PM
603	Add language for clarification on scope of practice for the combined licensure School Psychologist and Licensed Psychological Associate.	1/2/2026 12:24 PM
604	I would address predatory supervision practices - especially holding associates to lower price per hour then taking a percentage of that cost then charging supervision fees and sometimes office rental on top of it!	1/2/2026 12:18 PM
605	CE broker automatically calculate CEUs with the free plan.	1/2/2026 12:17 PM
606	I would not have so many rules over which CEUs are mandatory because it keeps you from being able to count material you studied for growth in your area. I would make it just one hour of multi cultural	1/2/2026 12:10 PM
607	I would focus on exploring ways to help providers. For example years ago I was kicked out of Medicaid because your entity failed to tell where to check my active status. This is just unacceptable.	1/2/2026 12:07 PM
608	Two things: I would increase communications to help practitioners understand better understand the Council's role and how they support therapists vs practitioners being afraid of interactions with the Council Secondly, I would increase and/or empower staff to dismiss frivolous claims against therapists before the therapist is required to come before their Board.	1/2/2026 12:06 PM
609	I would lower the fees for ceus and improve the process. I almost was out on leave by my	1/2/2026 11:58 AM

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	employer due turn around time of renewal. New licensures are slow which in turn keeps new licensees from working	
610	simplify everything	1/2/2026 11:43 AM
611	Create a fast-track for military veterans who obtain their masters in a mental health field towards full licensure.	1/2/2026 11:39 AM
612	If I was in charge I would explore online therapy and expand the reach due to AI advancement and movement into therapeutic spaces.	1/2/2026 11:32 AM
613	NA	1/2/2026 11:27 AM
614	Change the CE rules to make renewals easier	1/2/2026 11:24 AM
615	none	1/2/2026 11:16 AM
616	N/a	1/2/2026 11:15 AM
617	I would like to see reciprocity for licensing/practicing in other states. With the ability to practice virtually, it would be helpful to have the freedom to see clients from other states.	1/2/2026 11:07 AM
618	Join the counseling compact.	1/2/2026 11:06 AM
619	State to state practice should be easier	1/2/2026 11:04 AM
620	Implement the new licensing process as alternative to EPPP by 2027	1/2/2026 11:01 AM
621	If granted the authority to amend the Council's statutes and rules, I would eliminate the requirement for School Psychologists to obtain a secondary Licensed Psychological Associate (LPA) license in order to practice outside of school settings. Current statutes and Council Rule 465.38 create an unnecessary regulatory hurdle by confining a School Psychologist's expertise to public or private schools, even though their specialist-level training (60–70+ graduate hours) is more robust than the requirements for Licensed Professional Counselors, Social Workers, or Marriage and Family Therapists, all of whom are permitted independent practice at the master's level. It is fundamentally inconsistent that school-based related service providers like Speech Pathologists and Occupational Therapists can practice across multiple settings with their primary license, yet specialist level School Psychologists are limited to schools or must navigate a redundant and costly second licensure route to provide the same services to the community that they already provide to students. The primary reason for this change is to establish regulatory equity and maximize the state's mental health workforce. Requiring an SP to apply for an LPA license to practice independently fails to acknowledge the rigorous NASP-approved training, specialized assessment expertise, and extensive supervised practicum and internships already completed by these professionals. By allowing School Psychologists to practice independently under their primary license, the Council would streamline the recruitment and retention of experts who currently feel restricted to a single setting. This change would create a "bridge of services" between schools and the community, ensuring that families have direct access to highly trained diagnosticians without the bureaucratic friction of dual licensure. Ultimately, this modernization would protect the public by ensuring that those with the highest level of training in psychoeducational assessment are not legally barred from serving the community during a period of unprecedented demand for mental health and evaluation services.	1/2/2026 11:01 AM
622	Modernize and Simplify the Rules Many statutes and rules were written for a pre-telehealth, pre-burnout, pre-workforce-shortage world. I'd: • Eliminate redundant or outdated requirements • Use plain language instead of legal fog • Review rules on a set schedule Make Supervision Ethical and Realistic Supervision requirements often assume unlimited money, time, and access. I'd: • Expand approved supervision models (group, hybrid, tele-supervision) • Cap exploitative supervision fees • Provide clearer guidance on supervisor responsibilities and accountability	1/2/2026 11:00 AM
623	N/A	1/2/2026 10:58 AM
624	Keep politics OUT of the Council's statutes, rules, and processes, to ensure ALL Texans receive the same level of care.	1/2/2026 10:54 AM
625	Maybe lessen the total hours of CEU's needed every two years	1/2/2026 10:53 AM
626	?	1/2/2026 10:53 AM

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627	Licensees would have to pass an in-person counseling exam and educational institutions would be required to teach therapeutic skills. The educational system is NOT preparing students to provide therapy and neither does the current licensing exam.	1/2/2026 10:52 AM
628	I would make things easier to follow and understand. I would allow counselors to practice in multiple states without additional requirements. I would allow for billing of Medicaid and Medicare. I would create additional career paths for counselors who have been overworked and treated poorly in the profession and are experiencing burnout. I would make the complaint process for clients more stringent due to the disorder we often deal with. I would offer better training opportunities for individuals to become program managers or directors.	1/2/2026 10:52 AM
629	not sure	1/2/2026 10:48 AM
630	for it to not be necessary to navigate different state requirements	1/2/2026 10:45 AM
631	End requirement for third party tracking of CEUs	1/2/2026 10:43 AM
632	improve communication with licensee about complaints. Better support the licensee during complaint process.	1/2/2026 10:39 AM
633	Streamline and reduce wording as much as possible.	1/2/2026 10:31 AM
634	I would re-iterate the protected titles and terms used related to the provision of services and clarify that computer software cannot operate as a "therapist" or "social worker" or "counselor". I would write legislation that protects client data from being scraped by companies based only on good faith assurances that the information is being de-identified. I would write legislation requiring that information gathered by an AI note writing software cannot be copied and stored by that company, and must be deleted within a specific time frame and/or after the note is signed; and that the company cannot use that information for any purpose other than creating a note. I would also consider seriously who is going to be responsible for the content of that note, in case of errors/ hallucinations, lawsuits etc, and make that very clear to the users of the software.	1/2/2026 10:29 AM
635	It would be nice for future associates to be able to click on a link to check where their license is at, if it's been received, in process, or missing information that can easily be clicked on and uploaded. Licensing requests to be done via email and then not to be notified when approved is outdated.	1/2/2026 10:27 AM
636	I'd like to see a quarterly email of the new rules for each profession. Versus proposed rules followed with an updated rule book email.	1/2/2026 10:21 AM
637	Do not allow AI to infiltrate the profession. I get ads on "copy and paste" clinical notes. That is not acceptable in my opinion.	1/2/2026 10:20 AM
638	I would make it easier for someone licensed as a LCSW, LMFT or LPC to get one of the other licenses. I have a friend who is doing this and the process was way more complicated than it needs to be, especially since she has had the first license for about 15 years and a supervisor for close to 10. I don't think she needs to get the full 3,000 hours of supervised experience again since she is already a licensee in good standing with the Board.	1/2/2026 10:20 AM
639	Encourage more participation from associates. I am rather updated and involved but many associates don't read the new rules that come out or even know we can subscribe to emails. This would benefit so many associates and make us better prepared for full licensure.	1/2/2026 10:17 AM
640	None Identified	1/2/2026 10:14 AM
641	N/A	1/2/2026 10:14 AM
642	States working together regarding reciprocity	1/2/2026 10:12 AM
643	See 23	1/2/2026 10:10 AM
644	I cannot mention one in particular at this time. However, I would conduct a review of all statutes, rules, and processes and ask the following questions: 1. Which of the above are the ones most often violated, or which cause many counselors to lose or have their license suspended? 2. Which of the above are no longer relevant? 3. Which of the above are too restrictive of practices yet we have not had any issues, complaints, or caused issues for mental health professionals and clients? 4. Which of the above are confusing mental health professionals, confusion which are resulting in such professional to experience client complaints, lose or have their license suspended?	1/2/2026 10:10 AM

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645	To be independent of political identity and influence	1/2/2026 10:07 AM
646	Divorce from politics because I believe it is being clouded by big tech and too much oversight. We are not being treated as professionals and we should not be operating in fear.	1/2/2026 10:06 AM
647	Only those listed above--this can marginalize lower income professionals, diverse populations (race, gender, family status, etc.), and part-time students.	1/2/2026 10:05 AM
648	The expense of license renewal is costly. The cost of paying a supervisor and having access to a steady number of weekly hours is hindering LPC Associates from starting the process of accruing hours. This seems like an unsolvable problem for those who have completed the application process but do not start the work to accrue hours and start weekly supervision.	1/2/2026 10:05 AM
649	I would decrease the number of hours required. It is difficult to work in different settings when you are concentrating only on getting your hours. If the hours were fewer, counselors could feel comfortable gaining experience in multiple settings such as working in a private setting.	1/2/2026 10:04 AM
650	See answer in item 22	1/2/2026 10:02 AM
651	Links to CEU required subjects from approved providers to make sure this information is easily and readily accessible. I believe that we should have flexibility to choose CEU options that best fit our needs and interests but the credits for ethics or suicide can be more difficult to find.	1/2/2026 10:02 AM
652	I would provide process for licensing accessible for anticipating graduates of social work programs work with colleges on licensing	1/2/2026 10:01 AM
653	fight harder for Social work compact for Texas to join	1/2/2026 10:00 AM
654	N/A	1/2/2026 9:58 AM
655	I would change 681.38 (d)(2), because it is very arbitrary. For example, why 2-years as opposed to 2-months or 5-years? Is there data to suggest that the 2-year ban keeps people safe or upholds the spirit of the statute? If so, then why doesn't the ACA code of ethics or the ethical codes for other Texas MH professionals have this provision (e.g. social workers, LMFTs, Psychologists)? I would eliminate the 2-year provision and adopt something like the other professions have. For therapists in smaller communities, you may have treated someone, and then you find that person is in your neighborhood or starts going to your church and social circles get crossed. Likewise, there are instances where licensees seek help (i.e. become clients for a time) and then find their paths crossed in an employment or professional setting. Then what? Should these relationships be completely, yet impossibly, avoided until the clock clicks 2-Years? I think this needs to either be eliminated with a strong emphasis that a licensee cannot have a dual relationship with a client. And, if one has had a non-therapeutic relationship with an individual in the past, then they cannot initiate a new therapeutic relationship to avoid flipping back and forth. This would align with the codes of the other professions, as well as with the codes of the major national professional organizations.	1/2/2026 9:57 AM
656	I would seriously consider the impact AI is going to have on clients and future counselors	1/2/2026 9:56 AM
657	I'd work on a new licensure exam for Psychology. I passed it on the first try, but I had colleagues who took it 4 and 5 times. I recall that many of the questions were irrelevant to practice and I often wondered how many currently practicing psychologists would obtain a passing score. I also wondered who was writing the questions-- clinicians or academics-- as the exam should be written by a random assortment of currently practicing peers. Additionally, it cost over \$700 nearly 10 years ago. This was twice what my LPC colleague paid for their exam-- that they had 3 tries to pass with the one fee. I do think that a national exam has advantages, but the state boards need to realign the validity of the EPPP. I would also do away with post-doctoral training for those who came from accredited programs (APA) and who had accredited internships (APPIC). I graduated with over 6,000 hours of clinical practice. All of the gatekeeping should have happened by then. We need to be more efficient so that we do not deter people from pursuing training in Psychology. In the past 10 years, I have had 0 undergraduate students pursue doctoral degrees in Psychology. They all opt for master's programs in clinical mental health. If Psychologists offer skills and services that are unique, then we need to think long and hard about what is really necessary to become a Psychologist. Standards are important, but excessive standards create barriers-- and that doesn't benefit the field or potential clients/ patients.	1/2/2026 9:55 AM
658	N/A	1/2/2026 9:53 AM

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659	N/A	1/2/2026 9:50 AM
660	Go back to original CEU rules. Stop calling them Associates and return to Intern status.	1/2/2026 9:49 AM
661	I would create a professional group health insurance plan for all therapists. I would print copies and distribute rules to every licensed therapist. I would publicize the need for mental health in as many venues as possible. I would offer free CEU opportunities.	1/2/2026 9:49 AM
662	Join the counseling compact!!!	1/2/2026 9:47 AM
663	If someone admits to/is found to having sex with their client, take their license away (no grey area about that one).	1/2/2026 9:47 AM
664	none at the moment	1/2/2026 9:46 AM
665	Make it so LPCA's must work employed by a business that does primarily counseling BEFORE starting their own business. Supervisors MUST get the name, age and dx of the clients their LPCAs are seeing and be able to give direction to supervises.	1/2/2026 9:46 AM
666	I don't think we need human trafficking CE every cycle.	1/2/2026 9:44 AM
667	Be more transparent. Be nicer.	1/2/2026 9:29 AM
668	Establishing a category for semi or retired professionals to maintain a license category w/o reduced ceu reqs	1/2/2026 9:25 AM
669	I would add reciprocity with other states.	1/2/2026 9:25 AM
670	Join the Social Worker PACT and also build some continuity with the rest of the states for licensing requirements and CEU requirements. Since there is a shortage of licensed behavioral health providers across most states, it seems like states would come together to have cross licensing so that more providers with more specialized services would be available.	1/2/2026 9:22 AM
671	None.	1/2/2026 9:21 AM
672	I would make it easier for incoming calls to be answered quicker than I recall when I called many times over the years. I would find a way to inform callers that a response would be forthcoming and the times frame of said response. I would find a different or multiple ways of contacting Licenced individuals who's up for renewal other than a small postcard that reads, this is the only notification you get! This seemed unreasonable on many levels.	1/2/2026 9:21 AM
673	None	1/2/2026 9:20 AM
674	A person to contact not recording	1/2/2026 9:19 AM
675	Many rules, processes, and statutes are influenced by larger policies at the State and Federal level, so the main change would be increased staffing in order to provide clarity and timely responses for licensees. I've emailed multiple state boards regarding out of state licensure questions and received responses within 24 hours, one of them being California, so I know it can be done and is very possible, but it has to be prioritized.	1/2/2026 9:17 AM
676	N/A	1/2/2026 9:15 AM
677	Make it easier to track CEUs	1/2/2026 9:14 AM
678	I would grandfather's all old licensed counselors to be able to have national services to increase licensed counselors available due to current mental health crisis. From what I have been told the information tested is the same.	1/2/2026 9:14 AM
679	Provide meeting summaries, separate out division highlights, include easy access to pertinent laws, for each division all on website, because many of my colleagues are in the dark unless they are proactive. Website needs additional sections in addition to "News".	1/2/2026 9:12 AM
680	Unsure	1/2/2026 9:11 AM
681	I'd try to fix the website to make it more navigable and make rule changes easy to identify. The new language around what is acceptable for CEUs is difficult to understand. Please improve that.	1/2/2026 9:11 AM
682	Go back to a board that serves psychologists only. E.g. most of the approved human trafficking courses do not relate to my profession. They are for social workers, medical	1/2/2026 9:09 AM

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	personnel, etc.	
683	Eliminate all DEI language and policies.	1/2/2026 9:06 AM
684	I wouldn't lump all licensees under one council. There would be one for counselors, one for marriage and family therapists, one for social workers, etc. I'd get clear on what each group needs from its licensing body. Then I'd make sure that was provided. I'd also make sure that the state is supplied with therapists, counselors, and social workers to serve the public at large. And I'd provide education to those professionals to ensure they are ready to assist if needed.	1/2/2026 9:05 AM
685	Put psychology under medical board	1/2/2026 9:04 AM
686	Join Counseling compact. The rapport and trust of a counseling relationship is very important - just because a client moves does not mean that relationship should be broken..	1/2/2026 9:00 AM
687	NA	1/2/2026 8:58 AM
688	I would change the telehealth requirements to 1500 direct contact hours.	1/2/2026 8:56 AM
689	I will make sure that the same rule applies to everyone according to their license. Example: rules for LPC-A should be the same for LMSW	1/2/2026 8:54 AM
690	Easier for individuals to contact and receive information on policy changes and our ability to express concerns regarding the decisions being made for us. Changes to email style and information formatting with better summaries. Easier to access Information on what professional advocates we can speak with.	1/2/2026 8:53 AM
691	I would create a national license structure in favor of a state license. I would also remove the requirement for continued education units as there is no evidence that these support improved clinical outcomes.	1/2/2026 8:51 AM
692	Highlight the updates	1/2/2026 8:50 AM
693	I don't think I'd make any changes at this time.	1/2/2026 8:49 AM
694	None	1/2/2026 8:49 AM
695	None, more lobbying	1/2/2026 8:49 AM
696	Please have External consultants made Up of different type of representatives analyze your complaint and discipline process from the perspective of the therapist. I've been through this process and was appalled by the way it was handled, how I was treated and how long it all took. You must to better and be more ethical.	1/2/2026 8:49 AM
697	Send out notifications of rule changes regarding licensing requirements each year so as to notify individuals of these changes !!!	1/2/2026 8:49 AM
698	Look at more ways to provide telehealth easily in other states	1/2/2026 8:49 AM
699	I have not yet navigated the new CE broker. I feel that there could have been better training and roll out.	1/2/2026 8:49 AM
700	See above.	1/2/2026 8:47 AM
701	Make coaching illegal or licensed.	1/2/2026 8:46 AM
702	None at this time.	1/2/2026 8:44 AM
703	Would continue to make sure that LPC Board Members are in attendance at discipline hearings/ISCs to ensure clinical expertise at each hearing.	1/2/2026 8:44 AM
704	I'm not sure if this is part of the question, but the jurisprudence needs to be modified; it doesn't match the statutes and rules handbook.	1/2/2026 8:42 AM
705	I would allow cross state service. I would add a person(s) to help applicants by phone in understanding the license process. One of my interns emailed a question regarding her classes meeting standards and the reply was, "It is up to you to understand board requirements." That was it, and it was a gray area. The response was dismissive and shaming. And we are left unsure of what to do next.	1/2/2026 8:42 AM
706	I would end the contract with the new CEU system. I piloted the system this year to renew my	1/2/2026 8:40 AM

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license, and the free version is terrible. You cannot tell what hours you need or are missing and it only gives you a red light or green light. Having to pay extra just to know this information borders on a scam. I understand the need to verify CEUs, but the platform does not seem a good value for what taxpayers are paying for it.

707	N/A	1/2/2026 8:40 AM
708	I may be missing something I am not considering, but I would like to be able to counsel old friends and their families after so many years of not being in contact.	1/2/2026 8:38 AM
709	Remove provisionally licensed clinicians from owning their own private practice. It stains the field with poor experiences from clients with some of these clinicians. Because many practice virtually, the clients are not familiar with the obligation to make it clear how to file a board complaint. There is no office to walk in and see that clearly posted. There is no other person from the practice to complain to. The associates don't always make it clear how clients can contact their BHEC supervisor. I would also place limits on the number of supervisees a supervisor can hold. I would also consider requiring supervisors to service a minimum of X number of supervisees per timeframe in order to maintain their supervisor credential.	1/2/2026 8:36 AM
710	Lower fees.	1/2/2026 8:35 AM
711	I appreciate the intentionality of the staff around availability for consultation in the on line meetings. Review of statute, rule, and processes changes is essential.	1/2/2026 8:34 AM
712	Greater representation of social work practice so that statutory guidance is more applicable and relevant to practice	1/2/2026 8:33 AM
713	Keep licensing in line with other states. Lower fees.	1/2/2026 8:31 AM
714	NA	1/2/2026 8:29 AM
715	Maybe have prerecorded video explanations of "how-to" address certain licensure issues.	1/2/2026 8:28 AM
716	unknown	1/2/2026 8:27 AM
717	More specific training provided by BHEC on statutes and regulation. Compliant process - more attention to time line, impact on practitioner, open process, assigned case to worker,	1/2/2026 8:27 AM
718	A more clear interpretation of rules for a better understanding by all licensee's. Which I understand is sometimes difficult.	1/2/2026 8:27 AM
719	More allowed virtual hours.	1/2/2026 8:26 AM
720	I would love to see licenses in general for LPC'S to be accepted by all states w/o having to go through various different expectations for that license. Psychology has and is doing it, why can't we?	1/2/2026 8:26 AM
721	Unsure	1/2/2026 8:25 AM
722	Ensure that psychologists oversee psychologists, ensure ceu requirements follow science and are free from politics.	1/2/2026 8:25 AM
723	100% they would answer the phone. Every time during business hours no excuses because our work is important and many questions are imperative for ethical practice, the person who answers would also be able to explain any rule or process instead of give a generalized answer that leaves the clinician wondering if they even asked the right person	1/2/2026 8:25 AM
724	The public is increasingly confused by the onslaught of master's level mental health professionals calling themselves "doctor" when their doctoral degree has nothing to do with providing mental health services (a new rule is needed for this).	1/2/2026 8:24 AM
725	Mandatory reporting. Add nuance for those in the field.	1/2/2026 8:24 AM
726	Make licenses less expensive and less paperwork. If a person has been practicing for 5 years and passed both national exams, then they shouldn't have to submit all their past coursework and verification of internship and practicum. And lower the CEU requirement after 5 years.	1/2/2026 8:24 AM
727	I would require all council members to hold an LPC-S. I would separate the areas of the council. When rule changes are made it becomes confusing what board is being referred to. I will provide an email blast with easy to understand new rule changes and a summary of why the change was made, and how it will benefit us and our clients.	1/2/2026 8:24 AM

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728	I would stop updating the rules so frequently. Counselors have enough on their plate. I would update rules once a year. Only 1-2 at a time and I would release them in the summer when counselors have more time to implement and learn them.	1/2/2026 8:24 AM
729	Finding ways to make sure people truly understand the impact mental health has. Making sure those who are practicing are ethical and not creating a problem when there is not one. I would want to find ways to talk with attorneys and our elected officials to find ways that the council could operate within bounds to help with insurance claims and creating a space that mental health is taken seriously. Some of that is training. Since online programs have been CACREP, I feel many coming out of school are just not prepared. As a supervisor of students for many years I am seeing a decline in preparedness of theories, lack of awareness of ethical issues and only being taught one aspect of client centered therapy.	1/2/2026 8:21 AM
730	none	1/2/2026 8:20 AM
731	The councils monthly open meeting doesn't allow for EVERYONE to speak. Wasteful time	1/2/2026 8:19 AM
732	If given the opportunity, I would prioritize the development of clear, standardized policies allowing clinicians to continue treating established Texas clients when those clients are temporarily out of state, provided the clinician is licensed and in good standing. I would also streamline application and renewal processes, standardize supervision documentation, and expand guidance related to telehealth and evolving practice models. These changes would protect the public while also supporting ethical care, workforce stability, and modern clinical realities.	1/2/2026 8:19 AM
733	unsure	1/2/2026 8:18 AM
734	clearly and overtly defined distinctions/definitions re: mental and physical health (behavioral health and physical/medical health)	1/2/2026 8:17 AM
735	I would grant reciprocity to individuals who have taken the National Exam and passed it. Patients should not have to wait until they are back home to receive therapy services	1/2/2026 8:16 AM
736	I would figure out a way to assess/train therapists to assure their political beliefs stay out of the therapy office	1/2/2026 8:16 AM
737	Don't know	1/2/2026 8:15 AM
738	Require each profession - LMFT, LPC, LP, etc. to provide a written explanation on their website and in office stating what type of professional they are and what that means in terms of training and ability to treat mental health problems.	1/2/2026 8:15 AM
739	Update them on a regular, predictable schedule (especially for clinical updates) so everyone knows and can be clear on what's being updated and when.	1/2/2026 8:13 AM
740	I'd harmonize the LMFT supervision requirement to be 4 hours per month versus four hours with it being weekly. This is hard for dually licensed supervisors.	1/2/2026 8:09 AM
741	Statutes about license eligibility due to past criminal history should be consistent across BHEC licensed professions. It makes sense for the board to make a case by case determination on these applications when the criminal history is not egregious, significant time has passed, and there is clear evidence of reconciliation and making amends.	1/1/2026 11:01 AM
742	None	1/1/2026 7:41 AM
743	reduce cost training and offer more on line options.	12/28/2025 3:35 PM
744	N/A	12/27/2025 11:52 AM
745	Applying for supervisor's credentials	12/25/2025 10:54 AM
746	n/a	12/24/2025 1:09 PM
747	I would improve communication, simplify licensing and supervision processes, and provide clearer guidance. This would help providers spend less time navigating regulations and more time focused on client care.	12/23/2025 11:57 AM
748	I had mentioned it in the previous section, but make provisions for becoming a supervisor.	12/23/2025 10:30 AM
749	Not many changes can be made due to the current governing body in this state.	12/22/2025 12:52 PM

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750	Perhaps it'd be wise to discuss why there's a counselor "shortage" for affordable counseling. Other states allow Associates to be Medicaid providers. When you allow students still in school to be thrown into seeing clients in group practices & A's going straight into doing telehealth do y'all wonder why clients complain: you're making sure our profession is undisciplined uneducated & we'll remain 50th in nation since 2017. Do better!	12/19/2025 10:58 PM
751	Th ability to obtain supervisory status prior to 5 years of LPC experience especially when supervisory status is held in other states	12/18/2025 2:43 PM
752	none	12/17/2025 1:27 PM
753	I would streamline communication to get more people involved in the process. I feel removed and confused by the emails communications regarding when/where/how to attend meetings. I also think sending reminder emails closer to the dates of the meetings would be beneficial.	12/17/2025 12:36 PM
754	none	12/17/2025 11:43 AM
755	I would reinstate the requirement for cultural competency for ongoing continuing education. The standards were already exceptionally broad. We are not serving the public well by saying that professionals can ignore differences across groups of people and/or not receive up-to-date information about working with marginalized populations. Eliminating references to DEI in agency language does not eliminate our ethical obligations to serve ALL people in a competent manner and to be providing appropriate education, training, and licensing of a diverse workforce.	12/17/2025 10:45 AM
756	I love the listening hour but can't go during the day. Maybe afternoon or more than one time? I am a broken record but advocacy. I don't see the product of your advocacy with the TX legislature- example compact being derailed.	12/17/2025 9:12 AM
757	I think the Jurisprudence Exam is helpful to new and renewing LPCs.	12/17/2025 5:59 AM
758	Be supportive of licensed professionals and respond to inquiries in a timely professional manner. Don't ignore calls texts emails and other forms of questions and responses to your letters.	12/16/2025 9:41 AM
759	Educate staff on trauma-informed care and professional ethics	12/14/2025 3:58 PM
760	None.	12/13/2025 8:36 PM
761	We will see about the new CE system. Already some confusion. Hopefully it will get tweaked out.	12/13/2025 5:36 PM
762	Training across the Behavioral Health Field: Differential and license cross training CEU's credited with Behavioral Health Profession during renewal: (Social Workers, Nursing, Psychologist, Pharmacist, etc.)	12/13/2025 12:13 PM
763	I'd change the jurisprudence exam - it's not currently applicable to typical interactions. It also seems to be the same every two years which doesn't seem helpful. Feels like a waste of time.	12/12/2025 9:58 PM
764	None	12/12/2025 9:28 AM
765	I would make it easier for seasoned people in private practice to be able to serve on the board. There is a dearth of experience on the board of people that actually have real world, private practice, social work experience.	12/11/2025 7:49 PM
766	Moderated supervision and hours requirements	12/11/2025 2:52 PM
767	i would change the CE regulation, ensuring that CEs are obtained without privatizing how CEs are regulated	12/11/2025 1:39 PM
768	n/a	12/11/2025 10:24 AM
769	Return to requiring a board approved plan toward clinical licensure.	12/11/2025 9:32 AM
770	LPCs would have to practice under the supervision of a psychologist. All providers should be required to explain to patients their level of training and competency and clearly state that they are a counselor, psychologist, social worker, etc.	12/11/2025 9:23 AM
771	N/a	12/11/2025 7:52 AM
772	While I understand the need to protect clients and the citizens of this state, I just wish there	12/10/2025 5:46 PM

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was a little protection and concern for the therapist who are trying to really help improve the quality of people's lives in Texas.

773	Join the compact	12/10/2025 1:15 PM
774	none	12/10/2025 12:36 PM
775	Perhaps email summaries of meetings to those impacted, eg. LPC or LSWs, etc.	12/9/2025 9:16 PM
776	I wish that LPC Peer consultation or membership and attendance at TCA, TACES, local or regional Professional Clinical group was required.	12/9/2025 5:00 PM
777	None. The Zoom contacts and emails have kept me on track.	12/9/2025 3:12 PM
778	allow clinical practice across state lines	12/9/2025 9:36 AM
779	Nothing noted at this time.	12/9/2025 8:15 AM
780	Cut renewal costs in half. Make trafficking and cultural requirements either one-time events or discretionary. No fee for jurisprudence exam.	12/8/2025 11:44 PM
781	Would make it easier for clients & therapists to continue therapy when traveling or moving to another state for continuance of care	12/8/2025 5:56 PM
782	1. Establish language proficiency requirements for mental health professionals who wish to market themselves and provide treatment in a foreign language (e.g., Spanish). 2. Certify one or more recognized organizations to deliver formal language training, including both written and verbal assessments, with clear standards of proficiency. 3. Implement corresponding rules and statutes to ensure compliance and accountability across the profession. 4. Coordinate with insurance panels to require proof of language training or certification from an accredited organization for providers offering bilingual counseling services. 5. Introduce additional compensation for professionals who meet established language standards, recognizing the extra time, effort, and expertise required. Ultimately, these measures would enhance the quality of care, ensuring that clients receive effective treatment in their native language and benefit from providers who are truly proficient.	12/8/2025 3:17 PM
783	At minimum, we need to remove any administrative code or rule that is more stringent than the least stringent ethics code among all the professions. We should not have any code or laws that there might be exceptions to in practice so even if most therapists wouldn't do it and it's not the right thing 98% of the time but maybe in 2% of the time it's fine, that should not be a law or code or prohibition. We are professionals and our entire job is nuance and grey area and adults having agency. We don't need this level of regulation. It's harming the profession. One example is in 681.38.: A licensee may not engage in a non-therapeutic relationship with a client if the relationship begins less than two (2) years after the end of the counseling relationship. The APA code is silent on this issue and the ACA says not to do this only if it will harm the client. Furthermore, adults should have agency to make their own choices. As a result, this happens but it creates secrecy which is unhealthy for the client. For an admin code 2 months would be reasonable not 2 years OR just be silent on the issue of what clients are allowed to do after the therapy relationship ends. Again, it's not that this is a good idea most of the time it's that rarely it is acceptable for the relationship to evolve post therapy but this ends up causing harm. A rule with a monetary value of appropriate gifts is also well disputed within the field and lacks context to the client. \$50 is a LOT of money to a homeless person and of basically no value to someone in the top 1%. We already have ethics codes that cover this since it requires case by case consideration. We do not need admin code. While the appropriateness of a sexual relationship with a former client is extremely rare, it is possible and should not be criminalized. Again, adults should have the rights to make choices, even bad ones and we are infantilizing and stigmatizing former clients by having such rules as therapy becomes more common for life improvement and processing. In my opinion, code is not needed for former clients, we already have ethics codes, but if there is code something like 6 months or 1 year would make more sense-not because that should happen but because on very rare circumstances someone might meet their life long partner in a short session of therapy for a psychologically sturdy person and they shouldn't have to keep it a secret which will result in them not being able to talk about it, process it, and do it ethically.	12/8/2025 2:23 PM
784	Appears to be working well.	12/8/2025 1:06 PM
785	Rules and changes consolidated in one place. Somewhat hard to read.	12/8/2025 12:41 PM
786	streamline and give us some freedom regarding CEUs. The 50% ruling is frustrating. I have	12/8/2025 12:39 PM

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numerous additional certifications that are relevant, but I am restricted in fulfilling them appropriately with the 50% rule.

787	I would add more clarity on the council's power and influence with government policies, if at all. I know there are discussions and townhalls but I'm still not sure the role of the council when it comes to advocating for our profession on the government level. The current requirements for 18 months for lpc associates and 24 months for lmft associates create some barriers and complexities for those wanting to do dual licensure. I would standardize the length of time required by associates pursuing LPC/LMFT licenses.	12/8/2025 12:35 PM
788	I think the free CE account should be able to tell you if you have met the minimum requirements.	12/8/2025 10:56 AM
789	Not sure.	12/8/2025 10:22 AM
790	None at this time	12/8/2025 10:19 AM
791	Implement country wide Compact like nursing. Ensure LPC licenses are issued only from CACREP accredited courses	12/8/2025 7:20 AM
792	Counselor Compact	12/8/2025 12:51 AM
793	Wouldn't take this job on a bet	12/8/2025 12:20 AM
794	NA	12/7/2025 12:56 PM
795	Avoid narrowing of "standards of care" that actually reflect more of the medicalization, bureaucratization, and control of the field	12/7/2025 12:19 PM
796	Make it less verbose and easier to understand some of the nuances.	12/7/2025 11:40 AM
797	As an LPC-Supervisor, I would like to see some clarification on how long to keep supervisee records, expectations for logs for supervisees if audited, and when supervisees request records - within what timeframe? Additionally, it feels frustrating that supervisors are more responsible for associates (held to the same discipline for complaints), while also give more freedom (being allowed to have a private practice). As a citizen, I do not believe a provisionally licensed person should be able to run their own practice.	12/7/2025 6:38 AM
798	I realize it is incredibly difficult to figure out how to improve on the process.	12/6/2025 6:27 PM
799	I would allow for easier print of license renewal so I can display in my office	12/6/2025 10:56 AM
800	Easier process Better tracking Response and information time and knowledge	12/6/2025 10:24 AM
801	Making sure that current and formal practicing professionals are on the council at all times to advocate for current climate and day-to-day operations and can speak to what we go through	12/6/2025 8:53 AM
802	I would separate the divisions and make it easier to navigate to my particular professional rules and statutes	12/6/2025 7:55 AM
803	N/A	12/6/2025 1:02 AM
804	More nondogotal or social media options	12/5/2025 11:14 PM
805	Less rule changes or modifications.	12/5/2025 10:22 PM
806	I would make the website easier to navigate and streamline everything.	12/5/2025 7:53 PM
807	The council has done a great job. The licensure candidates are being responded to in a timely manner.	12/5/2025 4:31 PM
808	easier to understand rules and changes. It seems like you have to be a lawyer to understand things.	12/5/2025 3:59 PM
809	None and I don't want to be in charge.	12/5/2025 3:03 PM
810	I would ask to put the other licenses (LCDC, LSOTP, etc) under BHEC. I would ask for licensees to endorse what counties they practice in and if they provide telehealth - put this info in the license search for the public.	12/5/2025 3:03 PM
811	Fewer CEUs annually. It's expensive, hard to find time, and not always accessible	12/5/2025 2:36 PM

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812	I would halt the implementation of a second, alternative licensing exam for psychologists (i.e., Texas-specific EPPP). It is unneeded and I can't imagine the test that will be developed will be as robustly developed and validated as the EPPP (as flawed as the EPPP is).	12/5/2025 2:25 PM
813	No	12/5/2025 1:29 PM
814	Having a "lay person" version of documents	12/5/2025 12:33 PM
815	I would make it easier for supervisees to connect with supervisors on the website. I would also align with the pact to make LMFT licensing universal nationwide.	12/5/2025 12:10 PM
816	National reciprocity without having to join PsyPACT. (Every state should be moving towards this).	12/5/2025 10:48 AM
817	If one graduated in 1980, for example, the current rules should not apply to them because their program differences.	12/5/2025 10:18 AM
818	Overhaul and improve customer service process	12/5/2025 9:48 AM
819	I would not dedicate time or funds to the development of an alternative path to licensure. A path to licensure already exists in the EPPP and I believe an alternative path would have negative, albeit unintended, consequences. I would ensure that the abilities and limitations of each mental health field were clearly delineated to prevent practitioners from practicing outside their competency. I would allow Licensed Psychologists to prescribe psychotropic medications due to difficulties locating psychiatric prescribers for clients in need.	12/5/2025 9:40 AM
820	The council has improved so much over the past few years. They appear to make thoughtful decisions.	12/5/2025 9:38 AM
821	Advocate for us within the legislature to gain access to the Counseling compact.	12/5/2025 9:07 AM
822	I would try to make the rules more reactive in real time to things like AI, coaches vs. licensed professionals, and ways to make sure pre-licensed professionals are getting quality supervision and clear understanding of the rules for themselves as a way to protect our newest professionals and the clients they interact with.	12/5/2025 8:38 AM
823	None	12/5/2025 8:33 AM
824	Longer time before license renewal. Maybe 3 or 4 years.	12/5/2025 8:14 AM
825	None	12/5/2025 5:41 AM
826	Supervision would not be an additional cost for associates.	12/4/2025 11:21 PM
827	I would create a better website that is helpful and made it easier to communicate with the staff to answer questions.	12/4/2025 9:17 PM
828	Limit how many times an applicant can fail the licensing exam to two tries. Insist universities teach students about the test.	12/4/2025 8:06 PM
829	Unsure	12/4/2025 6:46 PM
830	I would implement a much higher level of transparency. I would really like that the emails sent out regularly by the council contain either the information about recent changes (as opposed to directing people to the Texas Register) or a link to the changes with an unbiased summary and reasons for the changes. I would implement statutes/rules that state that therapy and the practice of social work in Texas are protected titles/ professions that can only be used by living humans and may not be provided by an AI or other technological service "under the supervision of a licensed professional" (because that person will only be able to report damage done, not prevent it from happening). While you're at it you should also obviously include Counselors, Pastoral Counselors, Psychologists etc.	12/4/2025 5:32 PM
831	n/a	12/4/2025 5:31 PM
832	Please see above.	12/4/2025 5:31 PM
833	Have someone answer the phone	12/4/2025 5:18 PM
834	Na	12/4/2025 5:17 PM
835	Would make the 1500 hours and 3000 hours less. Would make it easier to get licensed (texas own board exam). would eliminate the timeline (the 18 month minimum) to get the hours to	12/4/2025 5:00 PM

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	drop the associate title.	
836	I would change the restriction that only LPC-S can supervise LPC-A, LCSW-S to LMSW etc. I would also unify the code of ethics for LPC and LCSW. Lastly I would join the compact.	12/4/2025 4:45 PM
837	Help make Texas part of the Counseling Compact!	12/4/2025 4:44 PM
838	So many improvements have been made that I really don't have any burning issues. After 40 plus yrs. in the counseling profession, I am gaining a real appreciation of how difficult it must be for the rule of law to successfully interact with the art of healing.	12/4/2025 4:11 PM
839	I would make the changes stated in 22 and 23. I would also push for greater collaboration with other States to make it easier, at least for a period of time, to continue therapy with a client who has to move out of Texas, or goes to another State for college, basic training, etc. Continuity of therapy would go a long way for a client facing changes and new challenges. I would imagine most therapists have been asked, "Can I continue to see you after I move?" or, "...when I go to college?"	12/4/2025 3:59 PM
840	I would advocate for more FTE's. Fight to keep the money paid into BHEC. The number of licensees is huge. Stop giving our money back to other programs in state.	12/4/2025 3:47 PM
841	none at this time	12/4/2025 3:09 PM
842	Not sure.	12/4/2025 3:08 PM
843	Staff training. I inquired about a rule and they refused to clarify it.	12/4/2025 2:59 PM
844	I would make summaries of rule changes even more efficient (such as what WisePractice Institute website does: https://www.wisepracticeinstitute.com/blog/); I would look into funding to provide free CEU opportunities partnered with TBHEC for license holders	12/4/2025 2:35 PM
845	I would change the interstate reciprocity because sometimes clients travel and/or move in the middle of crucial services. They should not be denied access to a therapist with whom they have rapport just because they're not sitting in the same state.	12/4/2025 2:25 PM
846	Push harder to join the interstate compact	12/4/2025 2:15 PM
847	more advocates for therapist and less focus on rule changes at least until the therapist shortage is fully addressed	12/4/2025 2:08 PM
848	Transportability of interstate licensure - Counseling Compact Reduce the CEU requirements	12/4/2025 1:49 PM
849	More explanation with the ethics	12/4/2025 1:33 PM
850	none	12/4/2025 1:30 PM
851	I would make the LPC renewal period every 3 years rather than 2, with the same continuing ed requirements	12/4/2025 1:10 PM
852	I would increase LPC-Associate post-graduation hours to 5000	12/4/2025 11:59 AM
853	Concise information from Council about what they are doing or changing	12/4/2025 11:51 AM
854	NA	12/4/2025 11:32 AM
855	N/A	12/4/2025 11:24 AM
856	Provide information (updates about changes in requirements for providers), obtain information from licensees that is more user friendly requiring less time and management proving you are continuing to be educated. I read and listen to expert podcast, collaborate, and am in good standing with the board year after year, yet I have to provide more and more information. I don't have time to document every book or continuing education I receive. I liked the random audit so much better.	12/4/2025 11:03 AM
857	N/A	12/4/2025 11:00 AM
858	I would start by trying to reduce the sheer number of rules - surely some of these can be consolidated? I might try to "crack down" on the number of unlicensed professionals who are essentially providing mental health services - "mental health professionals" providing counseling in primary care clinics but who have no degree or license, theologians calling themselves "doctor ____" (technically, they have a PhD) and offering treatment, "life coaches" - people offering "counseling" without any quality control or accountability.	12/4/2025 10:46 AM

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859	I would make it simpler to find a supervisor for clinical hours.	12/4/2025 10:43 AM
860	Not sure	12/4/2025 10:14 AM
861	I would provide written documentation of license renewal.	12/4/2025 10:03 AM
862	I would make the website more user friendly for all different intellects and abilities. There is good work being done over there, but it's hard to figure out what's changing and what's getting done from this side. Social workers need safety and alliance right now since the profession is being undermined and "de professionalized" while we're in the midst of a mental health crisis where so many Americans are silently suffering and unaware of how to find affordable social services	12/4/2025 9:46 AM
863	Enhanced clarity, transparency, and support (for public and therapists) to ensure easy access to therapy services with limited bureaucratic involvement and "hoops".	12/4/2025 9:27 AM
864	Making the process of getting a clinical social work license better. Explain it and provide support on getting it	12/4/2025 9:23 AM
865	NOTHING	12/4/2025 9:17 AM
866	More board members who are in the profession.	12/4/2025 8:55 AM
867	Statutes at times are not always written clearly which I would try to improve.	12/4/2025 8:53 AM
868	i would make it to where you have to go to a sit down in person school for grad school. these online schools are producing these air head therapists	12/4/2025 8:49 AM
869	As a supervisor/director of a training clinic, I respect the rules that exist and find them to be aligned with what I have seen in other states. I have no concerns at this time.	12/4/2025 8:43 AM
870	Allow 100% online CEUs. You know like how we allow telehealth, and acceptance of online degrees. Ordering food. Communications. It would be like me requiring the council to send an in person notification of all changes or announcements. Seems unfair doesn't it?	12/4/2025 8:30 AM
871	Audit only high-risk individuals for renewal, not make every single individual upload all of their training every renewal period.	12/4/2025 8:14 AM
872	Rumor has it that licensees who have a complaint filed against them may not find out in a timely manner. Notice should be given within 38 hours. Additionally, investigations should be limited to the complaint and not be increased to a broad sweep of looking for any and all possible violations.	12/4/2025 8:06 AM
873	return to valuation of cultural competency	12/4/2025 7:36 AM
874	None	12/4/2025 7:28 AM
875	Stop changing and adding rules....not sure why the constant edits	12/4/2025 6:10 AM
876	I would do a podcast for social workers and the other professions that are covered under the program	12/4/2025 5:41 AM
877	Disregard fingerprints, not applied in a safe manner	12/4/2025 1:23 AM
878	n/a	12/3/2025 11:09 PM
879	The whole Council is not needed, and needs to be eliminated.	12/3/2025 10:55 PM
880	See above— more efficient	12/3/2025 10:51 PM
881	I know anyone in the public can file a complaint, but I've heard from colleagues about the hoops they had to jump through to prove their innocence on an unfounded complaint simply because they wouldn't support or agree with the client's homemade diagnosis.	12/3/2025 9:27 PM
882	None at this time	12/3/2025 8:26 PM
883	I would recommend that Behavioral licenses. e.g., LCSW, LPC, etc. are renewed on a 3 year cycle.	12/3/2025 7:53 PM
884	Supervisor qualifications and standards. I feel that we need more vetted. So maybe a reference/ recommendation letter added to supervisors application.	12/3/2025 7:38 PM

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885	I don't know what kind of advocacy is allowed, but I would be doing everything I can to help social work push back against private companies encroaching on the way we work.	12/3/2025 7:32 PM
886	Establish reciprocity with all other states.	12/3/2025 7:23 PM
887	<p>If I were responsible for shaping the Texas LPC Council's statutes, rules, and processes, I would focus on three core goals: 1. Expanding access to care 2. Improving the pipeline of future clinicians 3. Reducing unnecessary administrative burdens that don't improve client safety Drawing from 15 years of practice experience, LPC-S leadership, managed-care clinical oversight, and my mission at The Optimistic Counseling Practice — empowering Black women and other underserved communities to access culturally responsive care — here are the changes I would prioritize: ——— 1. Fix the Temporary License Bottleneck (LPC-Associates) Texas is in a mental health shortage, yet new clinicians struggle to get hours because agencies only hire fully licensed LPCs. What I'd Change • Require all state-funded agencies, school districts, and community mental health centers to accept a minimum percentage of LPC-Associates for clinical roles. • Create state incentives (stipends, tax breaks, or reimbursement boosts) for private practices that supervise Associates. • Develop a state-run matching portal connecting LPC-Associates to available supervisors and sites. Why Texas currently meets only a fraction of its mental health needs, especially in underserved communities. Increasing the pipeline of fully licensed clinicians — especially clinicians of color — is essential to reducing health disparities. ——— 2. Modernize Telehealth Rules for Today's Workforce Telehealth is essential for rural clients, disabled clients, and working parents. What I'd Change • Simplify telehealth documentation requirements that are redundant or overly restrictive. • Mandate parity in insurance reimbursement for teletherapy vs. in-person therapy. • Streamline cross-state practice rules for temporary crisis situations or client relocation. Why The pandemic proved that telehealth increases access and improves continuity of care — that's consistent with TOCP's work serving clients statewide via secure telehealth . ——— 3. Reduce Administrative Burden That Has No Clinical Benefit Too many rules increase therapist burnout without improving outcomes. What I'd Change • Simplify continuing education tracking and automate CE audits. • Shorten or remove unnecessary paperwork requirements that duplicate information in EHR systems. • Make the disciplinary process more transparent, with clearer timelines and communication. Why Therapists spend too much time fighting bureaucracy instead of serving clients — especially when they are small private practices like TOCP, where administrative time directly reduces access to care. ——— 4. Improve Cultural Competence Standards & Representation Only ~4% of mental health providers are Black, and Texas has major gaps in culturally responsive care. What I'd Change • Add a mandatory anti-racism + cultural responsiveness requirement to CE hours (not just “diversity training”). • Recruit more clinicians of color for Council seats, task forces, and rulemaking committees. • Require training for supervisors in culturally responsive supervision, not just clinical oversight. 5. Increase Transparency in Board Timelines (Applications, Renewals, Investigations) Many clinicians lose income because they're waiting for slow processing. What I'd Change • Publish expected processing timelines for licenses, renewals, and complaints. • Require the Council to post quarterly performance metrics (e.g., average processing time). • Establish guaranteed maximum turnaround periods, except in complex investigations. Why This protects both clinicians and clients — and prevents unnecessary employment gaps, especially for new clinicians. ——— 6. Streamline Supervision Requirements Without Lowering Standards Supervision is the backbone of ethical practice, but some rules are outdated. What I'd Change • Allow group supervision to count for more hours. • Allow hybrid supervision (video + in-person) without added paperwork. • Provide free state-funded supervisor trainings to increase the number of qualified LPC-S providers. Why Texas needs more LPC-S supervisors — especially culturally responsive supervisors — to address the shortage described in your grant and capability statements . ——— 7. Expand the Scope of Practice Where Clinically Appropriate LPCs in Texas are highly trained but still face limitations that restrict client care. What I'd Change • Allow LPCs to serve as “mental health professionals” in all Texas statutes (education code, CPS, hospitals) — ending discrepancies across systems. • Expand LPC authority in crisis response settings, so LPCs can assess and recommend level of care without secondary signatures by other disciplines. Why You have years of utilization review, crisis, and ER psychiatric assessment experience — you've seen how scope inconsistencies slow down care. ——— 8. Require Managed Care Organizations to Show Clinical Fairness As someone with extensive managed care experience, you understand how insurance rules harm access. What I'd Change • Require transparency from insurance companies on authorization denials, appeal rights, and parity compliance. • Allow LPCs to file complaints directly with the Council when MCOs violate mental health parity laws. • Advocate for state-level enforcement similar to federal parity oversight. 9. Create a Clear, Trauma-Informed Ethics Framework for Modern Practice Issues Some rules haven't been updated to reflect real clinical situations.</p>	12/3/2025 7:13 PM

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What I'd Change • Add guidance on working with marginalized populations, racial trauma, and culturally based family dynamics. • Provide clearer standards for DMs, texting, teletherapy across state lines, and crisis management. 10. Increase Support for Therapist Wellness & Burnout Prevention Therapists can't pour from an empty cup. What I'd Change • Require agencies with more than 10 clinicians to provide annual burnout and secondary trauma assessments. • Offer state-funded CE courses on boundaries, ethical caseload management, and self-regulation. • Encourage agencies to adopt trauma-informed workplace policies.

888	I would reverse the decision to require CE Broker accounts. I have coworkers in other states where it is required, and no one has good things to say about it. During the CE Broker/Council webinar, the council specifically said that CE Broker doesn't sell our personal information, but that does not appear to be true. Their privacy policy indicates that they "share" information for advertising, among other things. Also, it seems like the Council is implementing more rules about CEUs but won't give clear answers regarding which CEU courses/vendors do/don't meet their rules. That's very frustrating.	12/3/2025 7:12 PM
889	Make them more clear. They are very dense.	12/3/2025 7:04 PM
890	The recent requirement to document CE via a commercial, 3rd party web site (CE Broker) came as a big surprise to my colleagues and me. The pressure to pay to subscribe, obvious focus of the site on professions others than psychology, difficulty of having to upload evidence twice if you have two licenses, extremely poor customer support (took them 1.5 mos to respond to a quick question I had about multiple licenses), and quick introduction of this requirement without a comment period or any open forum to collect feedback (and without transparency into the reasons for the change before it happened) struck me as uncharacteristic of the careful way in which the board typically approaches changes. Previously, knowing about being selected for a license audit a month or more in advance was very helpful to prepare appropriate evidence. Now, the addition of CE Broker, according to the webinar presented by the company and the board, means that licenses can be renewed but then audited after renewal. Many of my colleagues are upset that now, we will only know of an audit after we renew our licenses. This change seems to be provoking a lot of anxiety among licensees. I do not mind uploading evidence in advance, but many I've spoken to recently dislike the commercial nature of the arrangement and the new sequence for auditing.	12/3/2025 7:03 PM
891	Urge the Texas legislature to join the counseling compact so that Texas LPCs can work in other states in the counseling compact.	12/3/2025 6:59 PM
892	see above. Clear guidelines and boundaries for licensees with regard to performing psychological testing in particular. Evaluating the supervision requirements for psychologist licensure.	12/3/2025 6:54 PM
893	I believe the Council is doing a great job.	12/3/2025 6:45 PM
894	1) response to questions 2) accountability for answers provided 3) focused effort regulating individuals who practice through the venture capitalist platforms.	12/3/2025 6:00 PM
895	Not merge the different degrees as if we are all the same.	12/3/2025 5:53 PM
896	Have a FAQ area or status update area (i.e. Compact update, projected date of new rules, etc.) that way I can always refer to it. Also, a lot of your activities are during the day. I counsel at night because I have a day job. I am unable to attend your events. Recording them would be helpful.	12/3/2025 5:51 PM
897	Reciprocity Reimbursement	12/3/2025 5:50 PM
898	Return DEI and cultural competencies, use only masters level trained mental health counselors within the school systems, not "pastors"	12/3/2025 5:47 PM
899	wow, that is a great question. I might change the requirements for CEUs. There are so many specific CEUs to get it makes it difficult to manage and get them all. The jurisprudence exam feels like a money grab since there are tons of CEUs on ethics. Human trafficking CEU feels odd to require since we don't require CEUs for other specific issues like sexual abuse, LGBTQ+ issues, or other targeted groups. I also find it a bit silly to require Texas ethics in addition to general ethics.	12/3/2025 5:32 PM
900	Improve the communication system, simplify the renewal system.	12/3/2025 5:15 PM
901	communication	12/3/2025 5:13 PM

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902	I would work to protect LPCs working with children from getting caught in between divorced parents.	12/3/2025 5:10 PM
903	I find it, cumbersome to look up rules and keep abreast of changes.	12/3/2025 5:09 PM
904	Clarify stance on Psychedelic assisted psychotherapy.	12/3/2025 4:50 PM
905	Working with other states to agree upon dual licensure outside of Texas	12/3/2025 4:44 PM
906	I don't think the dual relationship stuff is clear or encompassing enough. I see a lot of damage being done here but it's not well regulated. I also think that there is way too little oversight and guidance for clinicians dealing with minors in divorce/custody/court-involved situations as it relates to who has consent, involving custodial parents, not getting siloed with one parent, records access, how to read a divorce decree (which we are mandated to do). I am very passionate about this topic and see a lot of therapists screwing this up. Getting better at this area should be a priority for the Board because I would bet that divorcing/family court-involved parents have got to be some of your top complainants. I think we could vastly improve this. I'd love to help	12/3/2025 4:41 PM
907	Keep an update database of free webinars, etc to help therapists earn CE hours.	12/3/2025 4:36 PM
908	Nothing at this time.	12/3/2025 4:30 PM
909	Promote IPR licensure. Clearly note IPR and LCSW are equivalent licenses. The only difference is the latter includes clinical practice. People believe LCSW is 'higher' than IPR. Both licenses require 2 years of supervision.	12/3/2025 4:27 PM
910	I was not in favor of combining oversight of several helping professions into one Board/Council, but it seems to be going relatively well.	12/3/2025 4:25 PM
911	None	12/3/2025 4:16 PM
912	remove 3rd party brokerage and work directly with your providers without this "oversight"	12/3/2025 4:11 PM
913	I would try to keep it more in line with NASW and less in line with what Abbott or Trump believe.	12/3/2025 4:05 PM
914	Not sure of any changes.	12/3/2025 4:03 PM
915	I think more pre-licensed hours may be beneficial. I would also add back the requirement to engage in trainings around cultural competency. It feels like you guys don't take our role as clinicians seriously sometimes and that impacts our clients and anyone who is seeking out therapy.	12/3/2025 3:52 PM
916	Possibly provide more opportunities for the required continuing education at minimal or no cost.	12/3/2025 3:42 PM
917	Reinstate the 2 year requirement for supervisor training	12/3/2025 3:37 PM
918	n/a	12/3/2025 3:30 PM
919	I would simplify them significantly. It's too hard to keep up with all the changes all the time and use the license issued by the Council. Emails stating oil change awareness are super helpful with this, but there have been significant changes in the last 10 years that are overwhelming.	12/3/2025 3:25 PM
920	Educate both professionals and the public about the unique roles of each helping profession, how these roles overlap, and how these professionals can collaborate effectively to better serve the public.	12/3/2025 3:12 PM
921	Lengthening the renewal terms would help in cost, ease and workload for everyone (and still be available to unlicense those who need that action taken).	12/3/2025 2:57 PM
922	Easier to understand explanations would help understanding. I'm not a lawyer and much of the information is in legal terms	12/3/2025 2:49 PM
923	Allow people to customize CEUs to what will help them most	12/3/2025 2:40 PM
924	None	12/3/2025 2:31 PM
925	the way they are written.. I would make sure that the rules are clear and ensure reader can make informed decisions after reading and not require an interpreter of the information.	12/3/2025 2:27 PM

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926	I would make it easier for therapists and other skill trades to navigate the website, and utilizing the peoples trainings, and skills to ge the license. As my husband has had issues with the Electrician side of things which makes me think that is why Texas is short on Electricians and Counselors.	12/3/2025 2:25 PM
927	None at this time.	12/3/2025 2:24 PM
928	I would make domestic violence, intent to commit homicide, intent to commit suicide reportable, as in alignment with many other states	12/3/2025 2:22 PM
929	None come to mind	12/3/2025 2:07 PM
930	Unsure at present time	12/3/2025 1:46 PM
931	NA	12/3/2025 1:41 PM
932	I would implement a TBHEC owned tracking system instead of referring out to a for profit entity.	12/3/2025 1:41 PM
933	I would make renewing my license easier. It would cause less stress.	12/3/2025 1:35 PM
934	N/A	12/3/2025 1:29 PM
935	None	12/3/2025 1:20 PM
936	None at this time	12/3/2025 1:12 PM
937	Allow more flexibility in obtaining CEU hours.	12/3/2025 1:00 PM
938	Do a 5 year credentialing period instead of two.	12/3/2025 12:57 PM
939	Return to psychology board. We appeared to being just fine. I suspect Combining boards lowers our independence	12/3/2025 12:53 PM
940	I would make the main changes to the statutes, rules, and processes for the year a headliner on the website for the first two or three months to remind licensees about changes or upcoming changes for the new year. I really don't see any huge changes because I think the Council is doing a great job.	12/3/2025 12:51 PM
941	Tracking CEU online is one I had wanted but it was addressed	12/3/2025 12:50 PM
942	I would push to make it possible for LPC-Associates to take insurance, as well as for students to have the possibility of waivers for associated licensing fees.	12/3/2025 12:46 PM
943	Make updates and changes to rules more clear when they are updated	12/3/2025 12:44 PM
944	None	12/3/2025 12:41 PM
945	Lower the number of supervised hours needed. Allow LBSW to practice like the other licenses.	12/3/2025 12:40 PM
946	If an applicant has been licensed in other states for more than 5 years. Getting test scores would not be required.	12/3/2025 12:39 PM
947	Moving renewal requirements to its own section not just in the statues Explaining requirements for becoming Supervisor separate from the rules and statues	12/3/2025 12:38 PM
948	As stated earlier, it's OK to have the official version of rules and regulations, but why not email us a summary of changes in plain, simple language, not legalese?	12/3/2025 12:36 PM
949	Less hours we already did internship in school. Make it liveable for associates.	12/3/2025 12:32 PM
950	All masters level clinicians regardless of degree or experience should be required to remain under the supervision of a doctoral level clinician (ideally a psychologist) in perpetuity similar to how physician assistants are required to always practice under a MD or DO physician. LPC-A's should not be allowed to open their own independent practices. This is leading to subpar care from inexperienced professionals who lack oversight of their skills and abilities after only 2 years of schooling and at most 1 year of clinical experience. Psychologists are not allowed to have then own practice until we are independently licensed after 5-7 years of intense clinical training. Master's level clinicians aside from Licensed Psychological Assistants and LSSP's should be prohibited from providing any type of psychological assessment that results in formal reports and diagnoses, especially neurodevelopmental disorders.	12/3/2025 12:27 PM

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951	not sure	12/3/2025 12:26 PM
952	I would definitely change the CE requirements to a flat number of CE's required and not require a specific number of DEI and ethics hours. I would have the CE broker be free and easily understandable for everyone. Right now everyone can input their CE's for free, but the site is very hard to understand and pushes buying upgrades because the free version is confusing and difficult to navigate.	12/3/2025 12:26 PM
953	I don't know all the statutes, rules and processes in deep to make any suggestions.	12/3/2025 12:19 PM
954	Consideration of renewal at the same time as a severe illness or family member seriously I'll or died. Being granted extension to get info in. My mom was seriously I'll during Covid. Continued for several months and then died. All around the time my renewal was due. When I contacted was told that it had to still be done.	12/3/2025 12:13 PM
955	I would minimize the number of professional development hours for renewal and license updates to any trainings they want, not specific ones that are approved by the state of Texas. That limits professionals that are really in unique niches with their client bases, plus adds undue stress to the process when the job is already stressful carrying the weight of the mental health of people in this day and age.	12/3/2025 12:08 PM
956	Make things clear enough for others to understand and offer step-by-step guides.	12/3/2025 12:06 PM
957	I'd hire more people to assist callers and licensees. I'd provide HELPFUL email summaries of what licensees NEED TO KNOW. I would communicate about free educational opportunities to licensees. I would eliminate the new database where licensees have to justify their training in a time consuming and detailed manner. If we MUST have a database listing licensee training, I would remove the private money grab from the database provider and make it a public-run entity. I would hire more people who care about helping licensees do good work. I would remove all religious training from the state sponsored private database of CEUs.	12/3/2025 12:00 PM
958	None	12/3/2025 11:54 AM
959	Trust us a bit more to be the professionals that we were educated to be in approved programs.	12/3/2025 11:51 AM
960	1. Slow down the process of adding new rules and important changes like CE broker, pull out all the stops in addition to social media and email: Send letters, or at least an email that confirmed you read it. 2. Evaluate groups affiliated with each Board, like NASW for ASWB, or at least distance yourself from any polarity 3. I understand governmental changes require policy changes, but BHEC can't be reactionary, no matter if one of their members (ASWB) is. 4. Orientation class for new licensees? 5. Find ways new ways to support/honor Clinical Supervisors. One supervisor translates to services to hundreds of people. We carry a lot of liability on our license. 6. Please find a way to evaluate the content (without making it difficult) of how supervisors are conducting their work. I know there are many out there who just do case review only, or they have large practices and rotating LMSWs in and out. Promising large caseloads but delivering little.	12/3/2025 11:40 AM
961	Nothing at this time.	12/3/2025 11:39 AM
962	Make it easier to navigate the website	12/3/2025 11:34 AM
963	Increased state license reciprocity to increase reach	12/3/2025 11:31 AM
964	Address the problems with the exams Provide an alternative to exam	12/3/2025 11:31 AM
965	Supervisors would need to provide a case load to the associates or have a lower fee schedule for supervision	12/3/2025 11:31 AM
966	See above statements throughout.	12/3/2025 11:28 AM
967	Extremely clear rules around supervision and accountability for hours being reported regularly to the board. Supervision requirements would be based on direct hours not 4 hrs monthly Graduates can continue to work after graduation and receiving their associates license. Some type of 3-4month temporary license if the student can show they have submitted all the paperwork passed tests and is just waiting for license to come through.	12/3/2025 11:22 AM
968	Clearer clarifications of rules	12/3/2025 11:17 AM
969	I think there are too many changes in the licensing requirements, i.e cultural competency, mandatory reporting, sex trafficking, it gets confusing	12/3/2025 11:15 AM

970	<p>The guidelines for specialty practice in neuropsychology should be codified into the Rules. Neuropsychology significantly differs from the general cognitive, emotional, and behavioral assessment work conducted by other mental health professionals. The purpose of neuropsychology is to make clinical judgments regarding the functional integrity of the brain and the specific effects of known brain pathology, based on expert assessment and analysis of these functions. For example, neuropsychologists are consulted by neurosurgeons in making decisions about brain surgery for patients with epilepsy. Even doctoral-level, independently licensed psychologists do not conduct neuropsychological evaluations without having received specialized training according to Houston Conference guidelines. Given the potential harm that can result from unqualified practice, it is imperative that clear standards are set to determine whether a provider possesses the minimum knowledge and competencies for the safe practice of clinical neuropsychology. The use of titles such as “neuropsychologist,” “clinical neuropsychologist,” and “forensic neuropsychologist” must be reserved exclusively for those who have completed the requisite training and demonstrated competency as outlined above. This is essential to protect consumers and ensure that neuropsychological services are provided by appropriately qualified individuals. The Council has already recognized this in establishing the Guidelines Regarding Competency in Clinical Neuropsychology, and it is time to make these guidelines formal Rules. Allowing unqualified individuals to practice neuropsychology is misleading to consumers, leading them to believe that they are receiving the same quality of services as they would from a licensed psychologist with advanced training in neuropsychology—the level of training necessary to assess and diagnose individuals with complicated medical, genetic, and neurobehavioral disorders. When unqualified providers conduct neuropsychological evaluations, serious errors can result, needlessly increasing associated medical costs. For example, cognitive impairment might be erroneously attributed to a brain injury or genetic condition, when in fact the patient has a treatable condition (e.g., sleep disorders, depression, etc.). In the process of a neuropsychological evaluation, failing to identify the possibility of serious yet potentially treatable conditions (e.g., normal pressure hydrocephalus, tumor, thyroid dysfunction, toxic exposures) could result in permanent brain damage or even death. Incorrect diagnoses resulting from improperly trained individuals conducting neuropsychological evaluations also can result in inappropriate referrals for other services, potentially adversely impacting the patient’s health and increasing unnecessary spending. This Council has already recognized the importance of this issue in establishing the Guidelines Regarding Competency in Clinical Neuropsychology. Why not then codify these guidelines as Rules for specialty practice in neuropsychology? Doing so would simply add clarity and enhance protections for Texans who may be easily misled by the numerous providers in our state who advertise “neuropsychological evaluations” despite not having appropriate training to conduct such evaluations.</p>	12/3/2025 11:14 AM
971	I would streamline supervision documentation, clarify expectations for 1099 clinicians, and improve communication around rule changes. I would also support faster processing times for applications and renewals to reduce barriers for new practitioners and ensure continuity of care for clients.	12/3/2025 11:11 AM
972	Be as clear, concise, and consistent as possible. Allow members to operationalize the rules in their practice within the limits of the statutes, rules, and processes. Our work is not one size fits all.	12/3/2025 11:09 AM
973	n/a	12/3/2025 11:08 AM
974	None	12/3/2025 11:05 AM
975	Get input before making changes	12/3/2025 11:05 AM
976	As I stated in the previous response, I believe a therapist needs to deal with their own issues before they work with clients. I've had several clients who have hurt clients, so I work with repairing the hurt.	12/3/2025 11:02 AM
977	Possibly make it easier to obtain an LPC for those with higher degrees in other specialties without having to obtain other higher degrees and incur more debt	12/3/2025 11:01 AM
978	I would add some more flexibility to the supervision hour requirements for licensees. For those of us who are in a strictly mental-health field and are receiving constant supervision, I believe that licensees should be credited extra hours for that.	12/3/2025 10:58 AM
979	I would tighten up restrictions on Lpc and Mft Associates, I feel they have too much independence and are not really prepared for the nuances of private practice with very little supervision. In essence, I think the board has gone too far and letting them have independent	12/3/2025 10:57 AM

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practices. In my personal experience associates coming out of graduate school are not ready for it and often make mistakes that are Problematic for the supervisor. As a supervisor, my primary concern is training that person to be an excellent therapist, and to be aware of the rules and liabilities and risk of practice. Now I find myself having to help them figure out finances, tax codes, Texas, workforce commission codes, and other Independent practice issues. That's a lot more work. I know a lot of supervisors who are bowing out because of it.

980	More clearly spell out requirements instead of expecting everyone to read lengthy, wordy emails	12/3/2025 10:56 AM
981	I would require that all employees take a course in customer service courtesy	12/3/2025 10:56 AM
982	Keeping people informed of all changes.	12/3/2025 10:55 AM
983	Certification/license/rules that allow disclosure and differentiate high scores	12/3/2025 10:52 AM
984	If you are going to use a reviewer from the community, that willingly volunteers hours of her/his time, I would expect better communication. My last experience with an attorney soured me to the process. Maybe you're not using reviewers anymore, I have no idea as he's never responded to me.	12/3/2025 10:48 AM
985	I would make sure a health insurance executive was included in conversations and/or townhalls so we can be better informed of insurance regulations and policy changes affecting our discipline.	12/3/2025 10:47 AM
986	Have Texas LPC's join the Counseling Compact.	12/3/2025 10:39 AM
987	Ethically we should be able to take our clients with us if they are well-established and we move employers or start private practice after several months of client-care. THIS IS FOR THE BENEFIT OF THE ESTABLISHED CLIENT. I am not talking about poaching clients. I am talking about established 6-month or longer clients. The fact that clauses are allowed in employer contracts saying we cannot take our well-established clients after we've worked with them or at an agency for a long time is NOT IN THE BEST INTEREST OF THE CLIENT. Aren't we all about the client and not doing them harm? Well lets be real about it and action this. Also, allow us to see well-established clients while they are out of state online, or have more state-to-state pacts! Our profession/clients are suffering because of this!!!!	12/3/2025 10:39 AM
988	Texas not having an CSW-Intern option makes it harder. I would allow CSW-Interns to do the work for a LCSW but under supervision.	12/3/2025 10:37 AM
989	As it now, none. Hopefully, one day I can be part of it.	12/3/2025 10:33 AM
990	I would prioritize increased clarity and alignment across statutes and rules related to psychological services in schools. Specifically: Clarify the scope of practice for LSSPs in relation to evolving dyslexia laws and MTSS/RTI legislation. This would help prevent misunderstandings about evaluation responsibilities and ensure that schools fully leverage the expertise of School Psychologists. Streamline communication and guidance for licensure applicants. Creating clearer, consolidated resources — including step-by-step pathways, timelines, and FAQs — would reduce confusion for new graduates and out-of-state applicants. Expand access to high-quality supervised internship opportunities. Strengthening partnerships with school districts and university programs would help address statewide shortages and ensure that candidates can complete their supervised hours without geographic or financial barriers. Increase transparency about how legislative changes affect LSSP roles. This would ensure practitioners are supported in maintaining compliance and high-quality service delivery in a rapidly changing educational environment. These changes would improve access to the profession while maintaining the high standards necessary to protect students and families.	12/3/2025 10:27 AM
991	If I were in charge, I would focus on making the Council's rules more inclusive of vulnerable populations while still upholding the highest ethical and professional standards. This could include scholarships, mentorship programs, expanded CEU resources, and stronger advocacy with elected officials to secure funding and policy changes that support social workers and the communities they serve.	12/3/2025 10:25 AM
992	Send concise summary of changes.	12/3/2025 10:24 AM
993	N/A	12/3/2025 10:22 AM
994	I would strengthen the rules around the practice of psychotherapy/psychology/etc. such that AI doesn't have the opportunity to take over the professional roles of licensees.	12/3/2025 10:17 AM

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995	I would Immediately take steps to join the counseling interstate compact. LPCs are as capable and even more capable than psychologists and they have a compact.	12/3/2025 10:17 AM
996	I also believe an additional safeguard should be built into the licensing process. When a supervisor has an associate on a remediation plan and ongoing concerns remain, even if the associate eventually completes their required hours, there should be a mechanism to recommend additional supervised experience under a different supervisor before full licensure is granted. This would create a valuable second layer of protection for both the supervisor and the supervisee. It ensures that concerns are taken seriously, that the associate receives the support they need to develop competence, and that the public is protected from practitioners who may not yet be fully ready for independent practice.	12/3/2025 10:17 AM
997	Address complaints in a timely fashion. Complaints that are over a year to be notified is unacceptable	12/3/2025 10:16 AM
998	none	12/3/2025 10:15 AM
999	Any time changes are made to the rules, I would post to the website and email members a summary of each change with a link to the updates in the rules document.	12/3/2025 10:15 AM
1000	PhDs would have prescriptive authority similar to nurse practitioners	12/3/2025 10:14 AM
1001	I would streamline everything across all states - I know that isn't something you all have complete power over but should be considered.	12/3/2025 10:14 AM
1002	Protect the citizens of the state including the providers	12/3/2025 10:10 AM
1003	Go back to the previous system.	12/3/2025 10:07 AM
1004	Unsure	12/3/2025 10:07 AM
1005	Easier system for tracking CEUs, particularly making it compatible with the systems utilized by big employers such as LMHAs (Integral Care in Travis County uses Relias, for example)	12/3/2025 10:06 AM
1006	None. Thank you all for all that you do.	12/3/2025 10:06 AM
1007	Allowing licenses to be acknowledged in the US.	12/3/2025 10:04 AM
1008	I have no suggestions at this time.	12/3/2025 10:03 AM
1009	More responsibility to associates for their actions.	12/3/2025 10:03 AM
1010	None	12/3/2025 10:01 AM
1011	Change the website to be friendly and ways to unionize therapists	12/3/2025 10:00 AM
1012	I would want a more accessible way to expand on a license to be able to provide more services and have other paths for a career to expand.	12/3/2025 10:00 AM
1013	None that I can think of at this time.	12/3/2025 9:59 AM
1014	I'd grow a backbone and not capitulate to the Governor's every want and need. He does not respect our profession nor prioritize the mental health needs of everyday Texans. We also need more transparency on how Council and Board members are chosen, and more members who are actually practicing counselors. I'd also have resources and support available to counselors re: insultingly low insurance reimbursement rates and lack of support with the administrative side of practice.	12/3/2025 9:59 AM
1015	Make the compact a priority for client continuum of care, streamline the license upgrade process, streamline the CE access and process.	12/3/2025 9:58 AM
1016	None...	12/3/2025 9:57 AM
1017	I would not be in charge, because I don't know all of the rules by legal numbers, only from ethics and practice.	12/3/2025 9:57 AM
1018	I would add Texas to the mental health compact so I could counsel virtually in other states.	12/3/2025 9:52 AM
1019	Mainly a better flow on how to renew, as opposed to sending a person from one website to another.	12/3/2025 9:52 AM
1020	Less requirements on CE's and actively advocate for an LMFT compact.	12/3/2025 9:52 AM

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1021	No opinion.	12/3/2025 9:52 AM
1022	increased presence at conferences with broad representation of social workers. Perhaps hosting a CE event that also has information about the services provided by BHEC	12/3/2025 9:52 AM
1023	Will need to circle back on this.	12/3/2025 9:51 AM
1024	I would decrease the time between graduation from a CACREP program completion and fully licensed LPC credentialing. The income of an LPC is not commiserate with the length of graduate school programs, practicum, internships, and associate hours. This is 5 years, at a minimum, without a full income. The full pay at five years out, @ \$52k/annually- cannot keep up with college loans re-payment. Our communities will see greater disparity in service providers per person.	12/3/2025 9:51 AM
1025	Associates that have opened their own office will need to clarify in all advertising that they are not fully licensed.	12/3/2025 9:50 AM
1026	Reinstate multicultural and diversity CE requirements in that language - not, as the Council Member said, avoid "trigger words"... When the Board rules conflict with codes of ethics... when the Board doesn't listen to it's constituents - the licensees and the general public and goes against an overwhelming majority... where's the democracy and where is our voice in any of this? You ask for our voices, we speak, then you ignore us.	12/3/2025 9:50 AM
1027	Compact licensing or at least some of the states that are closer in proximity to Texas as it is difficult to treat college students who travel back and forth to school or professionals who travel for work	12/3/2025 9:48 AM
1028	Allow LMFTs who are fully licensed to practice across states. It should be national. Maybe applying for a certification to practice in each state as an additional security would make sense for the states considering.	12/3/2025 9:48 AM
1029	I would remove the requirement for post doctoral hours and allow any hours from a sanctioned training experience with a pre-defined training plan obtained during doctoral training to satisfy the requirement.	12/3/2025 9:46 AM
1030	Can't think of anything right now	12/3/2025 9:45 AM
1031	Not sure at this time	12/3/2025 9:42 AM
1032	Provide an alternate path to licensure that is independent of the AAMFT.	12/3/2025 9:41 AM
1033	Na	12/3/2025 9:40 AM
1034	Have global rules for all independent clinicians. Each practice disciplines could have any specific criteria	12/3/2025 9:40 AM
1035	I would remove the CEU's division between approved or not approved providers, as it is not clear.	12/3/2025 9:38 AM
1036	N/A	12/3/2025 9:37 AM
1037	See above. I also would add an ethics hotline for licensees.	12/3/2025 9:37 AM
1038	Make the rules easy to access and read, perhaps in slide format with a user-friendly search function.	12/3/2025 9:36 AM
1039	I would give practitioners the option of helping clients in all states in the US without going through licensure in every state.	12/3/2025 9:33 AM
1040	They are doing best they can - need more recognition of the severity of this need in government and state funding	12/3/2025 9:33 AM
1041	I would encourage the council to consider a different CE broker who has a user-friendly system that is either reasonably priced (e.g. \$20/year) or determine another way to glean the CE information from professionals. I would encourage the Council to address the disparity in the ethical requirements as a psychologist and the government funding requirements in an effort to protect the public from receiving mental health services that are not in the best interests of the clients based on several decades of research and discussion culminating in our ethical standards.	12/3/2025 9:31 AM
1042	telehealth multistate licensure, requirement of CEU system and not offering to track for us	12/3/2025 9:30 AM

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1043	None.	12/3/2025 9:29 AM
1044	Less hours for supervision if completed 60 graduate hours with a practicum and internship.	12/3/2025 9:27 AM
1045	follow ASPPB model	12/3/2025 9:26 AM
1046	None	12/3/2025 9:26 AM
1047	create more equitable practices for associates including caps on percentage splits with practice owners, caps on supervision fees, and creating scholarships/grants/reimbursement plans for individuals to help pay for education and supervision	12/3/2025 9:25 AM
1048	Any changes should be provided with the notification of a change rather than requiring the clinician to go look it up.	12/3/2025 9:25 AM
1049	I would require social workers and counselors to certify that they have had at least 9 hours CEUs in addition to grad school courses before working with couples. I would make it required for licensees to have more than 1 grad school course on serving dual diagnosis populations. As a site supervisor, this is the area where I have to be sure to educate and train my interns (regardless of program).	12/3/2025 9:25 AM
1050	More dei/cultural humility, more rules that protect therapists from danger	12/3/2025 9:23 AM
1051	Less legalize, more plain language. Most rules are OK, but some are too vague.	12/3/2025 9:22 AM
1052	I would immediately have Texas join the counseling compact, and I would also reduce the time from associate to fully licensed as stated in my answer to question number 23.	12/3/2025 9:21 AM
1053	would have a separate board for Psychologists	12/3/2025 9:19 AM
1054	I would prefer statues, rules regarding minors to be a separate collection that is filtered with information/research established by Association for Play Therapy & Institute of Child Psychology	12/3/2025 9:18 AM
1055	N/A	12/3/2025 9:16 AM
1056	none	12/3/2025 9:14 AM
1057	I think I answered this also in question 18.	12/3/2025 9:14 AM
1058	I like the license renewal process being every 2 years. I recommend that this continues. I also recommend that the Rule allowing private practice of psychology be permitted for licensees who are licensed as a psychologist.	12/3/2025 9:14 AM
1059	I'd love consideration at a regulatory level of how people list themselves as "specialists" in areas. The advertising that mental health professionals do at present checks almost every box off on the clearinghouse websites (psychology today, any of the online therapy sites), but it seems impossible for someone to be doing every kind of therapeutic modality and every orientation. That would likely be bad practice, actually...I think truth in advertising is important and with an uninformed public, this will mean that people will not be funneled to the best providers for their needs.	12/3/2025 9:12 AM
1060	Same as #22!!!	12/3/2025 9:09 AM
1061	find a way to reduce the cost of supervision	12/3/2025 9:09 AM
1062	User friendly website.	12/3/2025 9:07 AM
1063	We are a caring profession. Our Council protects us but doesn't feel welcoming. I know. It's the logical, ethical stance. But, we are in the world of hearts, arts, health and souls.	12/3/2025 9:07 AM
1064	Allowing Counselors seeking PhDs to use their years and hours earned toward the PhD supervision hours as hours counted. Allow those with At least 2 masters degrees and a PhD to ne psychologists despite APA...bc many of our masters degrees are APA approved and	12/3/2025 9:05 AM
1065	Fix number 23.	12/3/2025 9:05 AM
1066	clarify situations where referring out is acceptable	12/3/2025 9:03 AM
1067	n/a	12/3/2025 9:02 AM
1068	counselor compact	12/3/2025 9:02 AM

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1069	None at this time	12/3/2025 9:01 AM
1070	Add links and language to the administrative code to make issues like mandated reporting requirements, telehealth, etc. clear and aligned.	12/3/2025 9:01 AM
1071	Get Texas into the national compact. And, reduce number of supervision hours for part time LPC-A's.	12/3/2025 8:59 AM
1072	None	12/3/2025 8:56 AM
1073	License expiration would happen after 5 years; 50 hrs required for additional education; this would help with time management including other responsibilities of a licensed professional.	12/3/2025 8:55 AM
1074	None	12/3/2025 8:54 AM
1075	I am barely keeping my head above water now, so I do not feel I have sufficient knowledge to offer a suggestion on this.	12/3/2025 8:53 AM
1076	I would absolutely change the leadership of this state agency to a director and investigation leader that wants to hold state license holders accountable for unethical and criminal actions. There is ZERO FAITH in this department that will ever do the right or ethical thing in this lifetime.	12/3/2025 8:52 AM
1077	Change the CEU process to make it more streamlined	12/3/2025 8:51 AM
1078	I can't think of anything. Though I still dislike that it's a combined council.	12/3/2025 8:51 AM
1079	I would reduce the ce requirement to 12 per renewal session.	12/3/2025 8:49 AM
1080	If given the opportunity to recommend changes to the Council's statutes, rules, or processes, I would strongly advocate for discontinuing the use of CE Broker and integrating all continuing education tracking directly into the state licensing portal. Many states already utilize this approach, and it significantly streamlines the process for licensees. CE Broker's limited national reach and inconsistent adoption across states make it an inefficient and unnecessarily burdensome requirement. Consolidating this function within the licensing system would reduce administrative complexity, improve consistency, and lessen the tracking responsibilities currently placed on practitioners.	12/3/2025 8:48 AM
1081	Visual tracker of applicant status Easier FAQ for supervisors	12/3/2025 8:46 AM
1082	remove all but ethics ceus for specific ceus. so drop cultural competency and human trafficking	12/3/2025 8:41 AM
1083	I would delete all of it and start from scratch for the purpose of identifying what's really necessary and important to protect the client and the clinician as well. There are too many superfluous laws n rules.	12/3/2025 8:41 AM
1084	None currently	12/3/2025 8:41 AM
1085	Make access more clear and streamlined. Compile all changes in one location. Give each license its own page with all info included for that particular license (much like the old LPC website used to be).	12/3/2025 8:41 AM
1086	No changes yet	12/3/2025 8:39 AM
1087	Free access to the required courses for licensure - Ethics, sex trafficking, etc.	12/3/2025 8:39 AM
1088	I would not be charging for the juris prudence exam on top of the licensing fee.	12/3/2025 8:39 AM
1089	The rule about whether or not to report self harm or potential of self harm without putting oneself in potential liability for breaking confidentiality.	12/3/2025 8:39 AM
1090	Count hours in a supervisory position before LPC licensure towards the LPC-Supervisor credential	12/3/2025 8:39 AM
1091	A way to do continuing education with a mentor colleague so a narrow effective focus can be maintained in your particular area of interest.	12/3/2025 8:39 AM
1092	Redress statements on ethics policy to make them reflect professional standards instead of being regulated prescriptions. Restore ORAL EXAMS for doctoral psychologists	12/3/2025 8:38 AM

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1093	I would make changes to increase transparency, streamline communication, and continue to let LPCs and LPC-Associates into the rule-making process	12/3/2025 8:38 AM
1094	None	12/3/2025 8:37 AM
1095	I would change the requirement in Technology Assisted Services to abide by rules in both jurisdictions. I am licensed in three states. Texas is not a Tarasoff state, the other two are. If I have to report (duty to warn) in Texas I can notify the police, but not the potential victim. In my other two states I am required to notify the victim. Thus, if I am sitting in Texas and have a client in one of those other two states, it is impossible for me to obey the law in both jurisdictions. The same is true for Texas allowing a redacted record or summary if I see a couple or family and all people of age of majority don't want to sign the release. Texas allows me to send a redacted record or a summary involving information on the person(s) that consented to the release. This is illegal in most other states and it is a violation of the AAMFT Code of Ethics. So, I violate this, if I am providing therapy to a Texas client while sitting in one of the other states I am licensed in.	12/3/2025 8:37 AM
1096	Add rules/statutes for psychedelic assisted psychotherapy	12/3/2025 8:36 AM
1097	free and readily available CEUS	12/3/2025 8:35 AM
1098	none	12/3/2025 8:35 AM
1099	NA	12/3/2025 8:35 AM
1100	Improve the website, I try only go to it if I need some but it overcomplex and outdated. Example I have send info to another state for another license total clueless where to go. Simplicity reduces stress.	12/3/2025 8:35 AM
1101	none	12/3/2025 8:33 AM
1102	let seniors be seen virtually as a LCSW i see them struggling with transportation	12/3/2025 8:33 AM
1103	I would eliminate the CEU verification provider requirement.	12/3/2025 8:33 AM
1104	I would reduce the 18 months to 12 months and the 3000 hours to 2000 hours. I wish LPC supervision could be free because most supervisors charge the same amount that resembles a utility bill and that creates financial hardship. The wait, the hours, and the cost of supervision has created significant stress.	12/3/2025 8:33 AM
1105	Not allow educational diagnosticians to work outside schools	12/3/2025 8:32 AM
1106	the requirements for CE's used to be simpler...I would go back to that. 6 Ethics, the rest regular. GOOD social workers take the variety needed already	12/3/2025 8:32 AM
1107	More professional access and representation at the state level to be more competitive. See Teachers level of representation. Teachers at the bachelors level are paid more with less education as our industry is not visible at state level	12/3/2025 8:32 AM
1108	I would like to see some securities added for supervisors. Associates have begun taking advantage of their ability to set up their own practices (i.e. signing on with a supervisor until they get their associate license). I would also like to see some safeguards against unlicensed persons doing this work.	12/3/2025 8:32 AM
1109	None	12/3/2025 8:31 AM
1110	I would find a way to let the LMSW still function, if it means grandfathering certain years and experiences into an upgrade or (in my book, downgrade) as an LSW is bachelors degree and, mostly, new MSWs.	12/3/2025 8:31 AM
1111	See #17 above. Allowing me to provide online counseling services to people residing in states other than Texas.	12/3/2025 8:30 AM
1112	Allow LMSWs under supervision to own their own practice; pass SW Interstate Compact	12/3/2025 8:30 AM
1113	Change the topics listed above: be allow to see clients in other states and make sure private clinicians and huge for profit corporations follow the same rules.	12/3/2025 8:29 AM
1114	Get rid of CE broker	12/3/2025 8:28 AM
1115	Unsure, I've never serviced on the council so I'm not sure the current workload or list of things	12/3/2025 8:28 AM

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	being prioritized.	
1116	Faster responses	12/3/2025 8:28 AM
1117	I would make it mandatory for places of business who require licensure to pay for their employees licesnure.	12/3/2025 8:26 AM
1118	None	12/3/2025 8:26 AM
1119	I don't know. I would have to study this specifically to advise. You can contact me if you want to involve me in this.	12/3/2025 8:26 AM
1120	Remove and replace the requirement to pass the EPPP, offering instead a test with more content validity. Revise and review current laws to ensure they do not conflict with one another about things like training hours, forms, required supervision, etc. revise jurisprudence exam to be current with questions that have improved validity. Reinstate separate boards for separate mental health divisions with specialized clerks working under each board. The practice of psychology is fundamentally different from the practice of marriage and family therapy and should be treated as such.	12/3/2025 8:26 AM
1121	NOne	12/3/2025 8:24 AM
1122	Possibly offer zoom meetings to discuss common rules and questions.	12/3/2025 8:24 AM
1123	n.a.	12/3/2025 8:24 AM
1124	I would say audit people more and make the licensing exams not as strenuous. Or make the testing centers more accommodating.	12/3/2025 8:24 AM
1125	Would stay with EPPP as method of assessment	12/3/2025 8:23 AM
1126	I would get rid of the CE tracker platform, and identify a free resource for therapists to use and easily track their CEs.	12/3/2025 8:22 AM
1127	See above	12/3/2025 8:22 AM
1128	I think it would have to be around the eligibility criteria, which I know is more state regulated.. but I do think if it was more unified and we were held to the same standards it would be a more unified and justifiable process.	12/3/2025 8:22 AM
1129	1. 40 hours of personal psychotherapy required to either graduate or receive license. 2. Proof of ability to implement strong measurement based care measures - this should be a cornerstone of education and clinical licensure 3. Provide financial support, added insurance, and training to intern sites that train students. 4. Have stricter minimal training requirements for intern sites and stop expecting interns to get paid (I spend 4 hours a week on each of my student interns, put them through 3 different CEU certification training programs on the company dollar, and provide robust support - this should be the norm, but it is costly to the company and comes with high risk) Have higher expectations of student intern sites and help interns understand that this is the companies giveback - they are paid in top notch training - education and training is not free. Allow supervisors of other disciplines to cross train and provide post grad internship hours. LCSW-S should be able to provide supervision to LPC-A etc	12/3/2025 8:21 AM
1130	Join the Counseling Compact please!	12/3/2025 8:21 AM
1131	I would want to monitor the fidelity of programs that are fast-tracking licensing. I think our roles require education, experience and supervision to be at a high level and standard.	12/3/2025 8:19 AM
1132	Add a section in the packet specifically for Higher Education institutions that consolidates all applicable federal and state statutes related to mental health counseling of adults ages 18 and older.	12/3/2025 8:19 AM
1133	None at this time	12/3/2025 8:18 AM
1134	If someone makes a complaint about someone on the profession, there should be a way to know what the outcome is.	12/3/2025 8:18 AM
1135	Update and streamline the website. Make sure all information matches in all places. Make updates and changes to rules easier to see in plain language, rather than just sending someone to a legal code.	12/3/2025 8:18 AM

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1136	Not sure at this early point in my career	12/3/2025 8:18 AM
1137	Instead of (seemingly) constant changes to the rules, review and modify rules on a regular scheduled 3, 4, or 5-year cycle. That provides all LPCs with an assurance of predictability.	12/3/2025 8:18 AM
1138	stated above	12/3/2025 8:16 AM
1139	None	12/3/2025 8:16 AM
1140	The way paperwork is processed and where to send specific forms. It is messy.	12/3/2025 8:16 AM
1141	The combined group of professions (eg. psychologists, social workers) inevitably doesn't allow one group to advocate for their discipline.	12/3/2025 8:16 AM
1142	A state compact that would allow Texas LPC's practice in other states.	12/3/2025 8:15 AM
1143	Leave the CE as is with the honor system	12/3/2025 8:14 AM
1144	None at this time.	12/3/2025 8:14 AM
1145	Agree with current	12/3/2025 8:13 AM
1146	See above	12/3/2025 8:12 AM
1147	I don't know.	12/3/2025 8:10 AM