



# A Message from... Cindy Boyle

First, I want to share with everyone what a privilege it has been to serve on the IMHCA board for the past several years and as the IMHCA president for the past year and a half. Unfortunately, the past couple of years have been filled with personal challenges including taking time off to help my mother care for my father after a cancer diagnosis, his subsequent passing, four surgeries of my own, and trying to maintain a new private practice all the while trying to raise a very independent minded little boy. As I am looking at the possibility of taking yet more time off for health

issues, I made the difficult choice to end my term as IMHCA president prematurely. This decision was not made lightly, and it is with much gratitude that I am pleased to announce Kelly Wagner has agreed to take on her presidential duties early. So as of October 2010 I began my past president duties and Kelly Wagner stepped up to take over as IMHCA president.

While it is not without some regrets I made this decision I feel good about the work we accomplished together as a board and an organization over the last several years. For the first time in many years we have established an active, full board. Board meeting attendance has also increased as has conference attendance. Even more important, is the quality of our membership. IMHCA continues to attract extremely qualified and competent members who serve in a variety of capacities from board membership, to conference planning, to

workshop development and presentations, to writing to legislators, to volunteering in a variety of ways. IMHCA members continue to do work which not only helps our association and Iowa mental health counselors in general, but assists in promoting information, education, and positive change in the field of mental health as a whole.

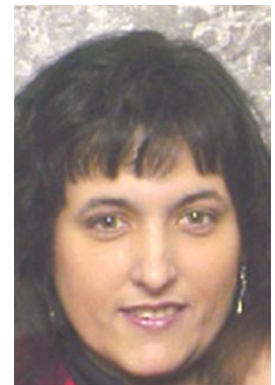
On a sadder note, as you all know we lost a valued member of the IMHCA family when Carol Charles-Rohlf passed away on November 14<sup>th</sup>, 2010. I attended the Celebration of Life service which was very inspiring. Carol was a great mentor to me personally and I will truly miss having her as someone I could go to, not only for her great wisdom and knowledge regarding professional issues, but also for her always positive outlook and unquestionable support.

**I would like to ask those of you who have memories of Carol to**

**share them in a special memorial section we would like to include in our next newsletter.** At her service many friends and family spoke, but I would like us to share some of our memories about how Carol positively affected the profession to which she was so dedicated. I think her family, especially her young daughters, would really appreciate something like this. You can email these to me at [cindy-boyle@yahoo.com](mailto:cindy-boyle@yahoo.com) or directly to our newsletter editor Lisa Turner at [lah.turner@gmail.com](mailto:lah.turner@gmail.com).

Thanks again for all your support!

Cindy R. Boyle, MA,  
LMHC, NCC  
IMHCA Past President



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## From the Hill... Legislative Update

Since the time of our last newsletter, another legislative meeting was held to further examine partnerships to achieve our legislative agenda. As stated in the previous newsletter, one of our goals specific to LMHC's is recognition for reimbursement under Medicaid. Although LMHC's are covered by Magellan, we are not listed as providers under Medicaid. This specifically prevents LMHC's from providing mental health services under the Children's Mental Health Waiver. Providing these services could be a key opportunity for new graduates with a temporary license to gain experience and supervision in the field to eventually become fully licensed Mental Health Counselors. Several years ago, the Marriage and Family Therapists, through lobbying, gained recognition under Medicaid. At the same time, through lobbying by the NASW Iowa Chapter, LMSW's gained similar recognition. This was an opportunity we also had, but at the time, did not contribute to the lobbying effort. As our profession strives for recognition under Federal programs such as Medicare, it is vital that we demonstrate a grass roots effort to gain recognition amongst all providers in Iowa.

A similar goal is to achieve recognition from all private insurance companies in Iowa and ensure we maintain reimbursement as we move into uncharted waters with new Federal Health Care legislation. In the past, LMHC's have not been reimbursed through Principal's health insurance plan. Additionally, there have been closed provider panels through Iowa Health Systems or United Behavioral Health. This puts consumers at a disadvantage as the consumer does not have access to mental health providers of his/her choice. Closed provider panels are also an issue that Social Workers and Marriage and Family Therapists also encounter.



A meeting was held in Des Moines on October 22 with representatives of the Iowa Mental Health Counselors Association, the Iowa Association of Marriage and Family Therapists, and the Iowa Chapter of NASW to look at how our three organizations could collaborate. No specific goals were discussed at that time, but instead focused on how the three organizations have such similar interests in serving Iowans and to ensure access to provider panels. This was an initial meeting to gauge any potential concerns about the three organizations working together before any further meetings. All the representatives agreed that we have no issues that really divide us that we were aware of and have much more in common that unites us. In order for our organizations to be effective in such critical times, we agreed that we would be better collaborating if our respective organizations would support such efforts and would likely translate into better support on the hill if we presented a united front.

In a previous meeting with the Iowa Mental Health Counselors Association and the Iowa Association of Marriage and Family Therapists, we agreed to hold off on detailing any specific legislative agenda until after the elections. Now that the elections have concluded, another meeting is set for November 22 with our mutual lobbyist, Emily Piper, to examine what we believe we may be able to accomplish during the legislative session. Further details will be communicated as the process develops. One area that is vital though is ensuring adequate funding. In order to draft any new legislation, we would need to pay \$5000 for lobbying efforts. It is important that we expand our membership, not only for our own professional development, but also to financially support legislative goals. Part of our way to raise funds is through our annual conference. Historically, our organization has not made any money from the conference, as

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## Student Column—An Attitude of “Gratitude”

Thanksgiving is upon us. It is one of my favorite holidays for several reasons. First of all, it is mostly a non-commercial holiday - there is no need to buy presents or cards, special outfits, or decorations. Secondly, the traditional way of celebrating Thanksgiving is simply to bring together loved ones and share a delicious meal. In my family, that always includes pumpkin pie, which I think is reason enough to love Thanksgiving.

But perhaps most importantly, Thanksgiving gives people a formal occasion to consider all the things for which they are thankful. Being mental health practitioners, we probably all know at least some of the benefits of cultivating a sense of gratitude in our lives: reduced stress; greater life satisfaction, happiness, and other positive moods; greater sense of connection with others; increased generosity and empathy... the list goes on and on.

Rather than filling this article with the many things I personally am grateful for, I asked several students in the Mental Health Counseling and School Counseling programs at UNI what they were grateful for about being a counseling student or becoming a counselor. Here is what they told me:

“I am grateful for being on an eight person counseling team during my internship as well as having university support back home in Iowa.” – Amber Freeman

“I’m grateful for the wide variety of courses available--specifically Animal/Nature-assisted Therapy and Adventure-based Counseling. They were fun AND educational!” – Ashlee Duimstra

**“I am grateful that our professors give us the leeway to develop how we want to, how we need to on our own.”**

**– Josh Carlson**

“I am grateful for deciding to be a counselor because it has opened up my understanding of the world. There are so many issues and concerns that I would have never been aware of if I had not decided to go into this profession. I am also grateful for a profession that makes me go outside of my comfort zone. There are many jobs in the world that have predetermined ways to accomplish the ultimate goal. However, with counseling there is so much flexibility, creativity, and spontaneity in accomplishing the ultimate goal of helping a client.” - Katie Gregor

“I am grateful for the support and encouragement of my peers and professors. I feel so lucky to be in such a wonderful program!” – Jaclyn Schultz

“I am grateful for the educational opportunities that our professors have presented to us and the ones that have been available on campus. Such examples are Time Wise's lecture and our opportunity to work with the high schoolers at Aplington-Parkersburg.” – Carrie Grady

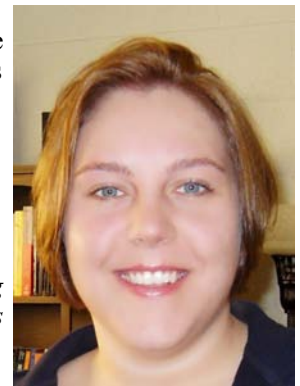
“I am grateful for the other members of my cohort. They have been a continuous support system and are all amazing people. I am glad to have this network of counselors going into my first year as a school counselor.” – Jamie Shields

“I am grateful for the opportunity to acquire higher education, my family's support during this journey, the privilege to hear people's amazing life stories, and all my clients' abilities to make themselves vulnerable and share very private and intimate stories.” - Josie Evanson Koop

I'd also like to share one thing that has been on my mind most days, as I am currently in my internship experience. I am grateful for my supervisors and the other counselor at my internship site – for the guidance on techniques, interventions, and resources when I am stuck, for the kind words of encouragement when I need them most, and for allowing me the freedom to find my own way of being a counselor.

Incidentally, I am also grateful for all the students who replied to my request - their responses helped me write this article!

*Jessica DeBoom is the Student Member of the IMHCA Board, serving since 2009. She is pursuing a Masters Degree in Mental Health Counseling at the University of Northern Iowa. For questions or comments regarding the student section of the newsletter or other student topics/concerns, please contact Jessica at [jdeboom@uni.edu](mailto:jdeboom@uni.edu).*



**Legislative Update, continued from page 1...**

this is a benefit to our members. However, with increased attendance, we have the potential to raise more funds for the legislative effort. If we would agree to seek new legislation to achieve our goals, we will need a strong effort from our membership to contact legislators in your respective districts to ask for support. We will likely also have a “Day on the Hill” to meet with legislators to talk about the work we do and ask for on-going support of our causes.

On the Federal level, the American Mental Health Counselors Association, American Counseling Association, and the National Board for Certified Counselors has successfully lobbied for LMHC’s being included for jobs within the Veterans Health Administration, including VA’s. This was crucial in establishing LMHC’s as providers on the Federal level and may be a building block as well toward Medicare. This effort though has not been without controversy. One of the contentious points for the Federal Government, including legislators and the Department of Defense, is the lack of a common standard nationally for LMHC’s. Different states have different requirements for licensure and many have tiered licensure. Some states require 48 credit hours while others require 60 hours. Some require attendance at a CACREP accredited program while others allow for programs that are content equivalent. Some require LMHC’s have completed the NCE while others require the NCMHCE. For further information on the requirements for these positions, please visit AMHCA’s home page.

The contentious part of the requirements is that not all LMHC’s are covered with the current rules. There has been considerable feedback from LMHC’s around the country with some pleased that this step has been accomplished while others are upset because not all are covered. The risk is that with those who are not covered providing feedback to legislators is that legislators may decide including LMHC’s is too much of a problem and view the field of mental health counseling as too fragmented. This would potentially leave LMHC’s left without any Federal recognition. The approach of the AMHCA legislative committee is to take an incremental approach to first take what recognition we can get and continue to strive for greater inclusion, including grandfather clauses. Additionally, it is important that all the states continue to collaborate toward more similar standards. It appears most states are moving toward a 60 credit hour requirement for licensure and some are pushing for the standard of students attending a CACREP accredited program along with taking the NCMHCE as a test for licensure. The idea of a common licensing standard is not new for many professions. Social workers, psychologists, and lawyers, all go through programs that are nationally accredited which provide a unifying, common language between each state. This is an area for our profession to improve.

***“The contentious part of the requirements is that not all LMHC’s are covered with the current rules.”***

As a member of the AMHCA legislative committee as well, it is crucial that we get feedback on the process with the VA. The only way we will find out how effective the legislation has been is for LMHC’s to apply for positions. Please continue to provide feedback on your views to myself or the IMHCA board. We strive to best represent the members of our association, our profession in general, and most importantly the needs of Iowans. You can email the IMHCA board at [boardmembers@imhca.net](mailto:boardmembers@imhca.net) or to me personally at [Erik\\_oo@yahoo.com](mailto:Erik_oo@yahoo.com).

Respectfully submitted,

Erik Oostenink



**A Chapter of the American Mental Health  
Counselors Association  
www.imhca.net**

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boardmembers@imhca.net**

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## Upcoming Events

The 2011 IMHCA Annual Conference is fast approaching! The conference will be held on May 12 & 13 at the Merle Hay Holiday Inn. The main presenter will be Dr. Gerard Jacobs, PhD. from the University of South Dakota. The keynote topic will be “Disaster Mental Health,” a timely topic in Iowa in light of the flooding in Central Iowa this past summer, recent tornadoes which devastate communities, unemployment, the economy, and other issues that cause crisis in families and community.

There will be a wide array of break-out sessions on Thursday, with Dr. Jacobs presenting on Friday. The call for proposals for the break-out session are due December 1, 2010 and can be sent to [christy.johnston@dmps.k12.ia.us](mailto:christy.johnston@dmps.k12.ia.us) Those interested in having a display, table, or poster are also encouraged to contact the above email address.

Respectfully submitted,  
Christy Johnston

## Dates to Remember

December 4 - IMHCA Board Meeting, DMACC Urban Campus, Des Moines

March 5—IMHCA Board Meeting, Waterloo

May 12 & 13—IMHCA Annual Conference, Des Moines

June 4—IMHCA Board Meeting, Des Moines

