
**SENATE COMMITTEE ON
BUSINESS, PROFESSIONS AND ECONOMIC DEVELOPMENT**

Senator Dr. Aisha Wahab, Chair
2025 - 2026 Regular

Bill No:	SB 993	Hearing Date:	April 20, 2026
Author:	Ochoa Bogh		
Version:	April 8, 2026		
Urgency:	No	Fiscal:	Yes
Consultant:	Anna Billy		

Subject: Board of Behavioral Sciences: licensees: notices

SUMMARY: Revises licensure disclosure requirements for Board of Behavioral Sciences (BBS) licensees or registrants, if certain requirements are met.

Existing law:

- 1) Establishes the BBS to license and regulate Marriage and Family Therapists (LMFT), Educational Psychologists (LEP), Clinical Social Workers (LCSW), and Professional Clinical Counselors (LPCC). (Business and Professions Code (BPC) § 4980 *et seq.*)
- 2) Defines an MFT and PCC “associate” as an unlicensed person who has earned a master’s or doctoral degree qualifying the individual for licensure, as specified. (BPC § 4980.03(b) 4999.12(f))
- 3) Defines a MFT and PCC “trainee” as an unlicensed person who is currently enrolled in a master’s or doctoral degree program that is designed to qualify the person for licensure and who has completed no less than 12 semester or 18 quarter units in any qualifying degree program. (BPC § 4980.03 (c) (4999.12(g))
- 4) Requires a LMFT, LEP, LCSW, and LPCC to display their license in a conspicuous place in the licensee’s primary place of practice. (BPC §§ 4980.31, 4989.48, 4996.7, 4999.70)
- 5) Requires a LMFT, LEP, LCSW, and LPCC to provide a written notice to clients prior to initiating psychotherapy services, that informs the client that the BBS receives and reviews complaints, as specified. (BPC §§ 4980.32, 4989.17, 4996.75, 4999.71.
- 6) Unless specifically exempted, requires a person to obtain a valid license or registration with the Board before engaging in the practice of marriage and family therapy, clinical social work, or professional clinical counseling (BPC §§ 4980(b), 4996(b), 4999.30))

This bill:

- 1) Authorizes an employing entity or agency of a licensee or registrant to exercise discretion, in specific practice settings, whether to include any or all of the following information: the licensee's or registrant's full name as filed with the board, the license or registration number, the type of license or registration and the registration expiration date in the notice required prior to initiating psychotherapy services, if the setting has an established process by which the client may request and obtain sufficient identification information to file a complaint with the board, that process is disclosed to the client as part of the notice and a copy of the notice is preserved as part of the client's records. Requires the licensee or registrant to be responsible, if exercising discretion is utilized, for ensuring the process to request and obtain identification is in place.
- 2) Includes the following specific practice settings: an acute psychiatric hospital, a correctional treatment center, any setting where mental health services are provided to incarcerated individuals under the jurisdiction of a local, state, or federal correctional authority, including but not limited to, a state prison, county jail, juvenile detention facility, or other correctional setting operated by or under contract with a governmental entity.

FISCAL EFFECT: Unknown. This bill is keyed fiscal by Legislative Counsel.

COMMENTS:

1. **Purpose.** This bill is sponsored by AFSCME Council 57 and AFSCME Local 2620. According to the Author, SB 993 will address serious safety concerns facing mental health professionals working in correctional facilities, and other high-risk settings. Under current law, providers are required to share detailed identifying information with clients prior to delivering services. While it's important for transparency and accountability, it fails to protect licensees who are dealt with the realities of working with incarcerated and high-risk populations, where disclosing this information can expose providers and potentially their families to harassment, threats, or harm. SB 993 offers a balanced solution for these mental health providers by limiting identifying information but still ensuring patients have a clear and accessible process to request the information necessary to file a complaint with the appropriate licensing board. This bill will restore longstanding protections for mental health professionals ensuring that both the incarcerated population and providers are working in the safest environment possible."
2. **Background.** The Board of Behavioral Sciences (BBS) licenses and regulates Licensed Clinical Social Workers (LCSWs), Licensed Marriage and Family Therapists (LMFTs), Licensed Educational Psychologists (LEPs), and Licensed Professional Clinical Counselors (LPCCs). Additionally, the Board registers Associate Clinical Social Workers (ASWs), Associate Marriage and Family Therapists (AMFTs), and Associate Professional Clinical Counselors (APCCs).

The Board is responsible for the regulatory oversight of over 148,000 licensees and registrants. Each profession has its own scope of practice, entry-level requirements,

and professional settings with some overlap in areas. LMFTs are employed in mental health agencies, counseling centers, and private practice. LMFTs utilize counseling or therapeutic techniques to assist individuals, couples, families, and groups with a focus on marriage, family, and relationship issues. AMFTs have completed the required educational program and are in the process of obtaining the hours of supervisory experience required for licensure. LCSWs are employed in health facilities, private practice, and state and county mental health agencies. LCSWs utilize counseling and psychotherapeutic techniques to assist individuals, couples, families, and groups. ASWs have completed the required educational program and are in the process of obtaining the hours of supervisory experience required for licensure. LEPs work in schools or in private practice and provide educational counseling services such as aptitude and achievement testing or psychological testing. LEPs may not provide psychological testing or counseling services that are unrelated to academic learning processes in the education system. LPCCs work in a variety of settings including hospitals, private practice, and community-based mental health organizations. They apply counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems. LPCCs work in a variety of settings including hospitals, private practice, and community-based mental health organizations. APCCs have completed the required educational program and are in the process of obtaining the hours of supervisory experience required for licensure.

Disclosure Requirements. Current law requires a licensee prominently display their license in their primary place of practice when conducting mental health services in person confirming for the patient that they are licensed with the BBS. Licensees or registrants licensed by the BBS are also required to provide a client with written notice prior to initiating mental health services, or as soon as possible, that states that the BBS receives and responds to complaints from consumers about mental health services rendered and document in a client's record. Due to the rise in telehealth services the requirements to physically display a license outside a traditional office setting became impractical. In response, SB 1024 (Ochoa Bogh, Chapter 160, Statutes of 2024) updated the procedures for licensed professionals regulated by the BBS by requiring that the written notice also includes the licensee's or registrant's full name as filed with the Board, the license and registration number, the type of license or registration, and the expiration date of the license or registration, amongst other provisions. Providing this identifying information to the client receiving telehealth services was a practical solution to create transparency and allow clients to obtain sufficient information to file a complaint, if needed.

As a precautionary measure, this bill seeks to restore previous protections for licensees and registrants who work in high-risk practice settings by allowing employers, based on individual safety concerns, to limit the amount of identifying information that is disclosed to the client, if the practice setting has an established process for the client to obtain said information to file a complaint, the process is disclosed to the client and recorded in the client file.

3. **Related Legislation.** SB 1024 (Ochoa Bogh, Chapter 164, Statutes of 2024) revised licensure display and disclosure requirements for a BBS licensee and clarifies the persons that count as supervisees, as specified.

AB 630 (Arambula and Low, Chapter 229, Statutes of 2019), required psychotherapy providers who provide services under a BBS license, registration, or exemption to give clients a notice disclosing where complaints against the provider may be filed and makes various technical, clarifying, and conforming changes.

4. **Arguments in Support.** AFSCME is the sponsor of the bill and writes in support, “AFSCME represents Licensed Marriage and Family Therapists (LMFTs), Licensed Clinical Social Workers (LCSWs), and other mental health professionals who provide critical behavioral health services within the California Department of Corrections and Rehabilitation (CDCR). Our members work daily in correctional treatment centers and facilities serving incarcerated individuals, delivering essential care in some of the most challenging and high-risk environments in the state. SB 993 addresses a safety concern for these professionals. Recent changes to law requiring mental health providers to disclose detailed personal identifying information, including full name and license details, to patients were well-intentioned in improving transparency, particularly in telehealth settings. However, in correctional and secure psychiatric environments, these requirements can unintentionally expose therapists to significant risks. Mental health providers working with incarcerated populations often treat individuals with complex behavioral health needs, including those with histories of violence. Requiring routine disclosure of personally identifying information in these settings creates the potential for misuse of that information, placing not only the providers, but also their families, at risk. SB 993 strikes an appropriate and thoughtful balance between transparency and safety...This preserves accountability while mitigating unnecessary risk.

SUPPORT AND OPPOSITION:

Support:

American Federation of State, County and Municipal Employees, AFL-CIO (co-sponsor)

Opposition:

None received

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