Client name	Michael R. Bütz
Form	Montana Licensing Reform Task Force
Matter	Michael R. Bütz - Rules
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Montana Licensing Reform Task Force

This Task Force was created pursuant to Executive Order 1-2026 on January 29, 2026.

Purpose of the Licensing Reform Task Force

The Task Force shall provide the Governor with recommendations and strategies for the State of Montana to reform the professional occupational licensing system for the purposes of:

• identifying and removing burdens and barriers faced by licensees that are not necessary to protect the public; and
• improving access to and availability of professional services for citizens across Montana, including rural communities.

In developing recommendations and strategies, the Task Force shall seek input from Montana citizens, legislators, Montana associations whose members are licensed occupational professionals, professional licensing boards, relevant state agencies, advisory groups and researchers focused on occupational licensing, and other appropriate stakeholders as determined by the Task Force.

Public Record

Please note that all information received through this form is public record.

Which committee would you like to receive your comment?

Full Task Force
Health Care Subcommittee

We want to hear from you!

We would like to receive any comments you would like the Task Force, or one of its subcommittees, to review. In addition, we are specifically looking for feedback for:

1. Specific topics a committee or the task force should consider, and
2. Specific people or organizations you think the task force should hear from.

Do you have a general comment or a specific person or topic for the Task Force to hear from?

Specific person or topic

What are your comments?

Please see attached letter.

Aspen Practice P.C.
dba, Michael R. Bütz, Ph.D.

Letter to Licensing Reform Task Force

July 17, 2026

RE: Consolidation of the Board of Psychologists into the Behavioral Health Board

Dear Chairman and Members of the Committee:

Thank you for taking the time to review my comments on this critical matter, and taking the healthcare stewardship for the citizens of Montana you have been entrusted seriously.

The comments that follow were largely presented to the Board of Psychologists in a virtual meeting held on July 7, 2026; though I have added some additional considerations and references. While I have associations and places of employment, the comments that follow only provide my individual opinion on these matters.

In plain terms, I am wholly opposed to the Board of Psychologists being consolidated into the Behavioral Health Board and I ask the Task Force's closely attend to this matter. (do you mean to attend)

What was not discussed in the meeting with the Board of Psychologists is my background, and it may well be important for the Task Force to be aware of it. I have been licensed as a psychologist for over thirty years, held licenses in five different states and was even licensed [registered] to practice in Australia. For the first twelve years of my career after graduate school I was in executive leadership for a number of organizations, and among these organizations some of positions that were held included: Co-Director of Psychology, Wyoming State Hospital; Director of Behavioral Health, Shoshone-Bannock Tribes (Idaho); as well as Board Member, Chief Operations Officer, Director of Crisis Services, and Director of Family Counseling Services at Washington County Psychotherapy Association (180 person organization in Maine). During the latter stretch of those years, and, following my move back to Montana to raise my sons in a less demanding role, I served an accreditation surveyor for Commission on Accreditation of Rehabilitation Facilities (CARF) for five years. In short, I had the opportunity to survey and suggest organizations for accreditation, or not. The organizations surveyed during that time supplied the whole continuum of behavioral health services across the nation, including Canada. In addition, I have been fortunate enough to be the published author of five books in the field and several dozen professional articles. Since arriving back in Montana in 2004 my service has included serving as Montana Psychological Association's Legislative Chair, President, and Federal Advocacy Coordinator, among other roles and volunteer work at organizations like Parents Let's Unite for Kids and STEP, Inc. It is from this background that I offer the comments that follow.

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1. Supervisory Capacity

The challenge here may be plain, but to be clear, as I understand it if these Boards are combined psychologists on the Board will be in the minority. Thus, the other members of the Board will be master's level licensed practitioners. The question that follows is:

> *If the training, supervision, and experience of these board members are less than those possessed by psychologist licensees, as in years less training, supervision and experience – how does it make sense that they have adjudicatory and supervisory oversight?*

This prospect is quite unsettling, no less considering the differences in Ethics Codes, standards of practice, etc. that differ between psychologists and master's level providers.

2. Potential Legal Problems

While training, supervision and experience at the doctoral level are considerable, there have been cases where masters level providers have conducted instruments/tests that are beyond their scope. Psychologists, on average, go through years of training in psychological assessment at bricks and mortar graduate schools. For example, there was *State through Louisiana State Board of Examiners of Psychologists v. Atterberry* (664 So. 2d 1216, 95-0391) from 1995 which was a civil appellate case in which the Louisiana First Circuit Court of Appeal upheld a preliminary injunction against an unlicensed master's level individual practicing psychology. As another related example of the outgrowths of consolidation, there have also been the well-documented troubles which North Carolina has created for itself. Treatises on this topic have included problems with a loss of expertise, fierce in-fighting, restraint of trade lawsuits, governance disputes, changes to leadership reporting structures, exercising political pressure versus healthcare expertise, and other bureaucratic red tape.[1] It has, in essence, created far more problems than existed in the first place.

3. Specialty Designations and Training

Then, we have the designation of specialties. For psychologists this involves years of more training, supervision, and experience before they are considered specialists in an area. In turn, such a specialization ought not to be claimed after attending workshop on an issue over a weekend, or even a week. A practice that, unfortunately, I have seen a number of master's level providers invoke to support their expertise in a certain area. These trainings are no substitute for graduate level semester courses on psychotherapy, an instrument/test, or, an assessment battery.

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[1] For example, see:

Nickodem, K. & Leloudis, K. (2025). *Consolidated Human Services Boards in North Carolina*. UNC School of Government.

Nickodem, K. (August 13, 2025). *Coates' Canons, North Carolina Local Government Law Blog*. https://canons.sog.unc.edu/

Nickodem, K. (June 9, 2025). *Coates' Canons, North Carolina Local Government Law Blog*. https://canons.sog.unc.edu/

North Carolina Bd. of Dental Examiners v. FTC, 574 U.S. 494 (2015)

That is, not to mention, the expected supervision and experience necessary for competently engaging in the practice.

4. Consistency in Montana Laws

Readily, I would not describe myself as an attorney, but in my different experiences engaging with the legislature "consistency" in the laws of Montana have been described in a variety of ways. In this case, it begs the question of, *Why is the Board of Psychologists being singled out?* I have heard no mention of the Board of Medical Examiners being consolidated under the Board of Allied Healthcare Professions, the Board of Nursing, or the Board of Physical, Rehabilitative, and Developmental Healthcare Professionals. Thus, it is peculiar that it has been proposed that doctoral level providers, such as psychologists, be consolidated within a Board of master's level licensees. Consequently, if the apparent reasoning for moving forward with this consolidation holds, then for example, it would follow that the Board of Medical Examiners be consolidated under the Board of Physical, Rehabilitative, and Developmental Health Care Providers, or perhaps, under the Board of Nursing...

5. Revenue Neutral

In the past, when such consolidations to 'save money' have been proposed one of the most glaring problems with such efforts is that Boards are 'revenue neutral'. In other words, the costs associated with running a Board are divided up into licensee's annual licensing cost. Thus, there are no cost savings, nor additional burden on the State or its citizens... Further, if this is a problem, there is a guiding, founding, principle within our country that would seemingly apply – *taxation without representation*. If psychologist licensees are paying burdensome licensing fees, and actually not the citizens of Montana nor the State since Boards are revenue neutral, should it not be put to the licensees (the very *people* impacted) whether or not they want the Board of Psychologists consolidated with the Behavioral Health Board?

Thank you for taking the time to review my comments on this critical matter, and if the Committee has any needed clarifications and/or questions please feel free to contact me.

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