

**FY 2024 Budget Performance Review**  
**14800 - State Board of Behavioral Health Licensure**

Lead Administrator: Eric Ashmore

Lead Financial Officer: Eric Ashmore

**Agency Mission**

The mission of the State Board of Behavioral Health Licensure (BBHL) is to protect the public by promoting and enforcing laws and regulations which govern the practice of Licensed Professional Counselors (LPC), Licensed Marital and Family Therapists (LMFT), and Licensed Behavioral Practitioners (LBP).

**Division and Program Descriptions**

*Note: Please define any acronyms used in program descriptions.*

**General Administration**

The State Board of Behavioral Health Licensure (BBHL) regulates licensure for Licensed Professional Counselors (LPC), Licensed Marital and Family Therapists (LMFT), and Licensed Behavioral Practitioners (LBP). This includes, but is not limited to, processing applications for licensure, issuing exam eligibility letters, approving and disapproving supervision agreements, calculating earned supervised experience, issuing licenses, investigating requests for inquiry in accordance with Oklahoma Administrative Code (OAC).

**FY'23 Budgeted Department Funding By Source**

Dept. #	Department Name	Appropriations	Federal	Revolving	Local <sup>1</sup>	Other <sup>2</sup>	Total
1000001	General Administration			\$395,867			\$395,867
8800001	Information Services - Data Processing			\$46,420			\$46,420
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	<b>\$442,287</b>	<b>\$0</b>	<b>\$0</b>	<b>\$442,287</b>

1. Please describe source of Local funding not included in other categories:

2. Please describe source(s) and % of total of "Other" funding if applicable for each department:

**FY'22 Carryover by Funding Source**

Class Fund #	Carryover Class Fund Name	Appropriations	Federal	Revolving	Local <sup>1</sup>	Other <sup>2</sup>	Total
N/A	Non-appropriated						\$0
							\$0
							\$0

1. Please describe source of Local funding not included in other categories:

2. Please describe source(s) and % of total of "Other" funding if applicable:

**What changes did the agency make between FY'22 and FY'23?**

1.) Are there any services no longer provided because of budget cuts? N/A

2.) What services are provided at a higher cost to the user? N/A

3.) What services are still provided but with a slower response rate? N/A

4.) Did the agency provide any pay raises that were not legislatively/statutorily required?

Office Manager received a 5% performance increase.

**FY'24 Requested Funding By Department and Source**

Dept. #	Department Name	Appropriations	Federal	Revolving	Other <sup>1</sup>	Total	% Change
1000001	General Administration	\$0	\$0	\$395,867	\$0	\$395,867	0.00%
8800001	Information Services - Data Processing	\$0	\$0	\$46,420	\$0	\$46,420	0.00%
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
		\$0	\$0	\$0	\$0	\$0	#DIV/0!
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	<b>\$442,287</b>	<b>\$0</b>	<b>\$442,287</b>	<b>0.00%</b>

1. Please describe source(s) and % of total of "Other" funding for each department:

**FY'24 Top Five Operational Appropriation Funding Requests**

Request by Priority	Request Description	Appropriation Request Amount (\$)
Request 1:	N/A - Non appropriated	
Request 2:		
Request 3:		
Request 4:		
Request 5:		
Top Five Request Subtotal:		\$0
Total Increase above FY-23 Budget (including all requests)		
Difference between Top Five requests and total requests:		\$0

Does the agency have any costs associated with the Pathfinder retirement system and federal employees?
No Federal Employees

How would the agency be affected by receiving the same appropriation for FY '24 as was received in FY '23? (Flat/ 0% change)
N/A

How would the agency handle a 2% appropriation reduction in FY '24?
N/A

Is the agency seeking any fee increases for FY '24?	Fee Increase Request (\$)	Statutory change required? (Yes/No)
Increase 1      No		
Increase 2		
Increase 3		

What are the agency's top 2-3 capital or technology (one-time) requests, if applicable?	Appropriated Amount (\$)	Submitted to LRPC? (Yes/No)
Description of request in order of priority		
Priority 1      N/A		
Priority 2		
Priority 3		

Federal Funds							
CFDA	Federal Program Name	Agency Dept. #	FY 23 budgeted	FY 22	FY 21	FY 20	FY 19
	N/A						

Federal Government Impact
1.) How much federal money received by the agency is tied to a mandate by the Federal Government?
N/A
2.) Are any of those funds inadequate to pay for the federal mandate?
N/A
3.) What would the consequences be of ending all of the federal funded programs for your agency?
N/A
4.) How will your agency be affected by federal budget cuts in the coming fiscal year?
N/A
5.) Has the agency requested any additional federal earmarks or increases?
N/A

FY'23 Budgeted FTE							
Division #	Division Name	Supervisors	Non-Supervisors	\$0 - \$35 K	\$35 K - \$70 K	\$70 K - \$100K	\$100K+
1000001	General Administration	2	1.5	0.5	2	1	
Total		2	1.5	0.5	2	1	0

FTE History						
Division #	Division Name	2023 Budgeted	2022	2021	2019	2014
1000001	General Administration	3.5	4.0	4.0	3.0	3.0
Total		3.5	4.0	4.0	3.0	3.0

Performance Measure Review					
Program Name	FY 22	FY 21	FY 20	FY 19	FY 18


[illegible]