

03/11/2026

**Bill:** SB 3026

**Position:** Proponent

To the Members of the Committee,

Thank you for the opportunity to express my support for **Senate Bill 3026**.

My name is David Gardner, and I am a Marriage and Family Therapist Associate in Rhode Island. I am writing in support because SB 3026 modernizes Rhode Island's LMFT licensure pathway to better match the national and regional landscape while maintaining MFT-specific quality controls.

Currently, Rhode Island's initial licensure law for MFTs, which requires 2,000 hours of direct client contact, does not align with national averages or other states in the region. Given the close proximity to other states in New England, it is essential that Rhode Island work to more closely align licensure standards with its neighboring states, while maintaining licensure standards that make sense for Rhode Island. SB 3026 does this by:

- Aligning direct client contact hour requirements with national and regional norms,
- Strengthening role-specific training by requiring supervised experience with couples and families, and
- Reducing unnecessary barriers to licensure portability across state lines.

These reforms support workforce stability and access to care in a small, interconnected region where many residents live, work, and seek services across state borders, especially in the digital age.

SB 3026 brings Rhode Island's licensure requirements in line with neighboring states while protecting quality of experiential preparation. The bill reduces the direct client contact requirement from 2,000 to 1,500 hours (while maintaining the two-year postgraduate experience requirement) and ensures MFT applicants receive supervised experience specifically working with couples and families by requiring at least 300 hours with couples, families, or groups of two or more individuals.

This matters for Rhode Island's workforce and access to care. Rhode Island is a small state with a highly interconnected regional labor market; we routinely see residents who live, work, and seek care across state borders. In the digital age, reducing unnecessary licensure barriers supports continuity of care and makes it more feasible for clinicians to practice where Rhode Islanders need them most.

As a home and community-based clinician working for Family Service of Rhode Island, I spend hours each week driving to my clients. Community-based therapy is needed for families across Rhode Island, especially those who have limited access to transportation. Since part of my work day is spent driving, I total fewer clinical hours compared to office-based clinical workers. SB 3026 would allow Marriage and Family Therapist Associates to provide critical community-based therapy while meeting the requirements for LMFT licensure in a reasonable timeframe.

I humbly urge the Committee to **support SB 3026**.

Respectfully,

David Gardner, MFT-A

Clinician, Family Service of Rhode Island

dav18dgardner@gmail.com