



THE CERTIFICATION BOARD
FOR MUSIC THERAPISTS

APPROVED PROVIDER MANUAL

**Fifth Edition 2010
Revised 2011**

**Quality, Integrity and Professional
Commitment in Music Therapy**



THE CERTIFICATION BOARD
FOR MUSIC THERAPISTS

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Introduction

The Certification Board for Music Therapists

The mission of the Certification Board for Music Therapists (CBMT) is to define the body of knowledge that represents competent practice in the profession of music therapy; to create and administer a program to evaluate initial and continuing competence of this knowledge; to issue the credential of MT-BC, Music Therapist-Board Certified, to individuals who demonstrate the required level of competence; and to promote music therapy certification.

The Certification Board for Music Therapists is fully accredited by the National Commission for Certifying Agencies (NCCA). By establishing and maintaining the recertification program, CBMT is in compliance with NCCA guidelines and standards that require certifying agencies to: 1) have a plan for periodic recertification; and 2) provide evidence that the recertification program is designed to measure or enhance the continued competence of the certified professional. Initially, CBMT measures the competence of a music therapist through the CBMT examination. Subsequently, CBMT's recertification program allows the MT-BC to choose between re-taking the examination or by earning recertification credits. NCCA accreditation demonstrates to certificants, employers, government agencies, payers, courts, and professional organizations that CBMT has been reviewed and meets certification standards set by an impartial, objective commission whose primary focus is competency assurance and protection of the consumer.

The literature base of music therapy is rapidly expanding and innovative approaches to clinical practice and research continue to be articulated and refined. The CBMT examination and recertification programs are designed to embrace this growth. The Practice Analysis Committee of CBMT convenes every five years to conduct a survey of practicing music therapists in order to identify the elements of current music therapy practice. The results of this survey are used to generate the *CBMT Scope of Practice* document. The CBMT examination and recertification programs are based on the most recent *CBMT Scope of Practice* and are thus representative of current music therapy practice.

The Continuing Education Committee (CEC) of CBMT administers and monitors the recertification program for certificants (MT-BCs). This includes advising CBMT Approved Providers and monitoring the educational courses they offer, recognizing certificants' participation in such courses, and maintaining quality assurance through periodic audits of Approved Providers' educational programs and certificants' recertification records.

CBMT Approved Provider Status

CBMT Approved Providers are an essential component of the recertification program and the educational courses they offer appeal to music therapists. More than 90% of over 5,200 MT-BCs choose the recertification option to maintain their board certification. This option requires the MT-BC to earn 100 recertification credits per five-year cycle. MT-BCs interested in maintaining their credential by earning CMTE credits are strongly encouraged to identify and utilize only those courses that are well designed and taught by professionals with significant experience and knowledge. A CBMT Approved Provider is an organization that is approved by CBMT to issue CMTE credits to certificants for participation in continuing education courses. CBMT Approved Providers are the preferred source for acquiring CMTE credits and the approval process ensures quality control in the CMTE experiences. In addition, CMTE credits earned through these courses are easy for MT-BCs to document and report to CBMT as approved credits.

The CBMT invites interested parties to consider applying for CBMT Approved Provider status and to participate in the growth and development of the practice of music therapy. This manual, with the accompanying applications and forms, details the policies and procedures that regulate the CBMT Approved Provider approval process and specifies the responsibilities of organizations that are approved to provide educational courses for CMTE credit.

Definition, Purpose, and Nature of Continuing Music Therapy Education

Continuing Music Therapy Education (CMTE) consists of educational courses that serve to maintain, develop, or increase the knowledge, skills and professional abilities that music therapists use in providing services to patients, clients, consumers, the public, or the profession. Since clinical knowledge and practices change, it is necessary for each practitioner to keep pace with current theories, methods, and techniques. In line with this, the subject matter of CMTE is derived from the knowledge and skill areas indicated in the current *CBMT Scope of Practice*.

The goal of CBMT's continuing music therapy education program is to allow certificants a range of options as they seek out learning resources to help them maintain, develop, or increase the depth and breadth of their clinical and professional knowledge and clinical skills. Any institution, organization, or association that has the education of music therapy professionals and/or those in related fields as part of its mission may apply for CBMT Approved Provider status.

An Approved Provider of Continuing Music Therapy Education courses:

1. Has the **authority** to designate educational coursework as approved by CBMT for a designated number of CMTE credits.
2. Accepts **responsibility** for monitoring and assuring the high quality of courses it provides, and for documenting through measureable learning outcomes that learning objectives have been met.
3. Must **facilitate** the three necessary components of continuing education:
 - Provide MT-BCs interaction with a learning resource
 - Facilitate continuing education experiences that help MT-BCs maintain, develop, or increase the depth and breadth of clinical and/or professional knowledge and/or clinical skills
 - Utilize information that is current to the field of music therapy, as defined by the *CBMT Scope of Practice*.

All educational coursework must provide an **in-depth** learning experience. The CBMT defines a 50-minute hour of coursework as equal to 1 CMTE credit. The **minimum** number of CMTE credits allowed for an approved event is 3. This translates to a minimum of 2 hours 30 minutes, or 150 minutes, of educational coursework. Registration periods and breaks cannot be counted towards credit. Lunch can be counted **only** if organized educational coursework takes place during the meal. CBMT does not award partial credits, so please round down (e.g., 2 hours 45 minutes or 165 minutes / 50 = 3.3; the course is worth 3 CMTE's).

Courses must be attended **fully** by participants to be able to claim the designated number of CMTE credits. Participants may not be awarded partial CMTE credits for partial attendance. CMTE certificates are to be distributed **after** participants have been present for the stated number of hours and have met all learning outcome evaluation requirements.

Types of CMTE Courses

General Courses

General Courses include CMTE courses offered at AMTA national and regional conferences, as well as a variety of individually designed workshops, presentations, courses, trainings, conferences, and seminars offered by CBMT Approved Providers for CMTE credit.

General Courses can also include interactive, non-standardized, online/distance learning experiences. Interaction (defined as scheduled and required participation in two-way communication between instructor and certificant) is required. In order to be considered interactive, the certificant needs to ask more in-depth questions than questions of clarification. If more than one instructor is presenting a CMTE course, the topics covered must be related to each other.

Standardized Self-Study Courses

Providers are encouraged to design and offer Standardized Self-Study (SSS) courses as an alternate means for MT-BCs to earn CMTE credit. A Standardized Self-Study course consists of a pre-designed, programmed course of study relating to specific areas of the *CBMT Scope of Practice*. SSS courses can be created and presented in various formats including computer, video, audio, paper, distance learning, etc. Standardized Self-Study courses include:

- Multi-media home study packages designed for individual use
- Video conferencing or broadcast Self-Study programs
- Non-interactive, standardized experiences (questions of clarification may be asked, but would not be defined as interactive)

The format for Self-Study usually consists of a mixed-media learning package with provisions for learner participation in the form of tests, papers, reports, etc. This type of course is characterized by accessibility and convenience of use and designed for completion within a specified time frame. All certificants can utilize such courses. However, they typically are designed to provide continuing education opportunities for those with specialized needs and for whom other options are not possible or practical. SSS Courses must include the original date of creation, as well as all revision dates.

Specialty CMTE Courses

Board Certification ensures that a music therapist possesses fundamental knowledge and skills—as defined by the current *CBMT Scope of Practice*. The CMTE courses defined in the *Recertification Manual (Fifth Edition)* serve to maintain or enhance this fundamental knowledge.

A Specialty CMTE course is distinguished from other CMTE courses by the following criteria:

- Taught by a professional with mastery of selected specialization skills and/or knowledge, and who holds appropriate credentials and at least 10 years experience in the area of specialty. Exceptions to the 10-year benchmark may be made on a case by case basis, upon review of instructor's written rationale of sufficient experience, research, knowledge, etc. to teach the course
- Imparts further breadth and depth beyond fundamental knowledge and/or skills
- Ensures that participants integrate the analysis and application of the knowledge and/or skills of the specialization area

Each Specialty CMTE course is reviewed by the CEC prior to being advertised to the public. Specialty CMTE courses must adhere to the same guidelines and requirements that apply to all courses.

Documentation Required for Preliminary Review of Specialty CMTE Courses

1. Résumé or vita of instructor(s) and evidence of credential, license, certificate and/or other documentation of expertise in the specialty area
2. CMTE Specialty Course Description Form, which includes identification of the area(s) of the *CBMT Scope of Practice* addressed by the Specialty CMTE, and specification of how the course imparts further breadth and depth beyond basic knowledge and skills
3. Explanation of how the course ensures the application and analysis of knowledge and skills of the specialty area
4. Sample certificate that conforms to all of the standard requirements (see pages 11 and 25) but indicates that the course is approved for “(# of credits) Specialty CMTEs”

Approved Providers seeking to offer a Specialty CMTE course may request a *Specialty CMTE Application* from the CBMT office at edarigan@cbmt.org or by calling 1-800-765-2268, ext. 23.

CBMT Approved Provider Application Process

Process for Approval

The first step in pursuing CBMT Approved Provider (AP) status is submission of the *CBMT Approved Provider Two-Year Provisional Application*. Upon approval of the application by CBMT, the AP enters two years of provisional Approved Provider status. During these two years, the AP is encouraged to offer multiple CMTE courses and solicit assistance and guidance from the CEC as needed.

At the end of the two-year provisional cycle, the AP may apply for five year status. The AP is audited at this time (see "Audits" section below). After successful completion of the audit and the *CBMT Approved Provider Five-Year Application*, the AP is granted five-year status.

Continuation of five-year Approved Provider status is dependent upon timely payment of all fees, submission of required materials, successful participation in the audit when selected, and completion of the five-year application when due ([Status Maintenance Requirements](#), pages 13-14).

Application Fees

The application fees for the CBMT Approved Provider Two-Year Provisional Application and the CBMT Approved Provider Five-Year Application are \$250 each for electronic submission, and \$300 for hard copy applications. Payment plans are available upon request.

Audits

Audits occur at the end of the two-year provisional Approved Provider cycle, at a randomly selected time during the first five-year cycle, and can also occur at random intervals during subsequent five-year cycles. Documentation required for audit includes:

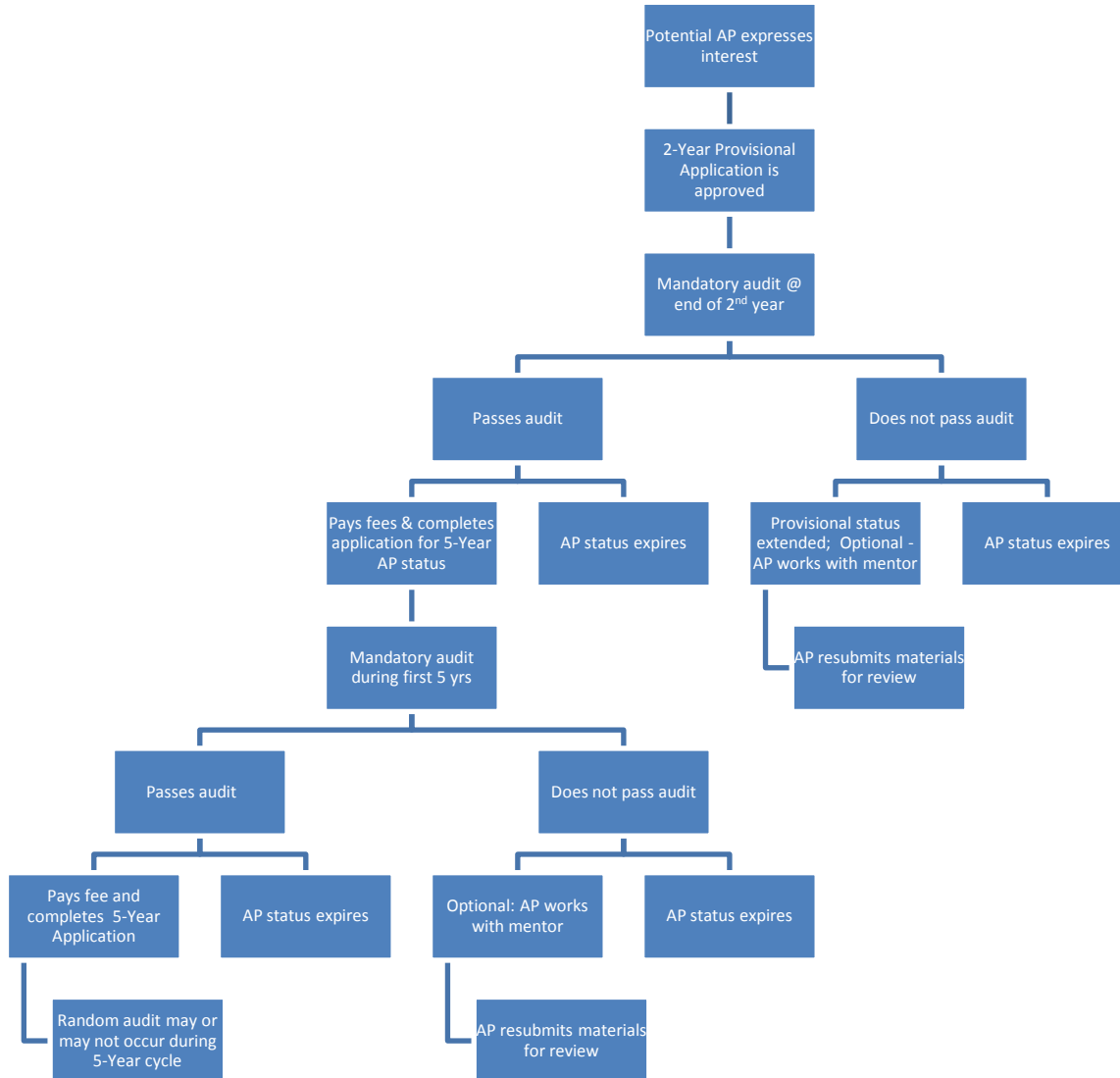
1. [CMTE Course Description Form](#)
2. [CMTE Course Certificate](#)
3. [CMTE Course Evaluation Summary Form](#)
4. **Resumes or vitae of presenters**

At the end of the two-year provisional cycle, the AP will participate in a mandatory audit of courses offered during the provisional period as part of their five-year application. Upon successful completion of the audit and application, the provisional AP is granted five-year Approved Provider status. If the provisional AP did not offer any CMTE courses during the two-year provisional period, provisional status expires.

Another mandatory audit will occur during an AP's first five-year cycle. During later five-year cycles, audits will occur at least once every ten years. When audited, the Approved Provider will receive a letter that identifies three CMTE courses that the AP offered during the current five-year cycle. The AP is required to submit supporting documentation for each course listed in the audit letter. If the supporting documentation is incomplete, the CEC will work with the AP until problematic areas are resolved and the audit is successfully completed.

The *Approved Provider Process Flow Chart* on the following page outlines the application and maintenance requirements.

Approved Provider Process Flow Chart



Application Requirements

Two-Year Provisional Application

Provider General Information

The Continuing Education Director (CED) is responsible for all correspondence between the Approved Provider and CBMT and therefore must have access to all files and records related to the Approved Provider's CMTE program.

NOTE: Any changes to this contact information during a cycle must be communicated to the CBMT office within 30 days of the changes.

CMTE Course Planning and Documentation

1. **Mission Statement:** CBMT requires a copy of the Approved Provider's mission statement that includes the need for the organization's educational program and its specific relevance to Continuing Music Therapy Education.
2. **Grievance Policy and Procedure:** CBMT requires Approved Providers to have a written Grievance Policy and Procedure that MT-BCs may utilize that is specific to continuing music therapy education courses. Each AP's CMTE Grievance Policy and Procedure must include informing MT-BCs of timelines to be observed in filing a grievance, as well as a participant's right to have a grievance addressed by the Continuing Education Committee of CBMT in the event that the Provider's Grievance Procedure is exhausted and a grievance is left unresolved. It is not necessary to include the Grievance Policy and Procedure in advertising materials. However, it is the Provider's responsibility to inform participants of its existence during the course.
3. **Instructor Qualifications:** All instructors of CMTE courses must be qualified to lead a given learning experience. This is determined by the AP and indicated on all promotional materials in the form of a short description of the instructor's relevant qualifications, credentials, and professional experience. Instructors' qualifications are also documented by means of résumés or vitae submitted to and reviewed by the CEC as required. It is the responsibility of the AP to obtain a current (updated within the past year) résumé or vita for each instructor and keep them on file. Résumés and vitae need to include all relevant education, certification, professional experience, presentations, and/or publications. **Brief biographical summaries are not accepted as substitutes for résumés or vitae.**
4. **Attachments:**
 - a. **CMTE Course Description Form**
 - 1) **Learning Objectives:** The AP must identify learning objectives (no more than four) for each course and articulate how these are relevant to continuing education in music therapy. In most cases, the course instructor articulates the specific learning objectives. However, some APs collaborate with the instructor(s). Learning objectives must be stated in simple measureable terms that are comprehended easily by participants and must be presented in all program announcements, advertisements, and brochures.
 - 2) **CBMT Scope of Practice:** All educational coursework must relate to the current *CBMT Scope of Practice*. The AP is ultimately responsible to ensure review of the current *CBMT Scope of Practice* and to identify the most relevant items that are addressed in a course and match them to specific learning objectives.

- 3) **Abstract:** The AP must identify detailed course content, including schedule and format. In addition, each course approved for CMTE credit must have a method for measuring and documenting participants' learning. This can be accomplished by means of a written assessment or an experiential method of evaluating learning outcomes developed by the Provider or instructor, based upon the stated learning objectives of the course. Minimal assessment must consist of the standardized CMTE Course Evaluation Form. The instructor may choose to include additional assessment methods appropriate to the course content.

NOTE: Identifying areas and specific items from the *CBMT Scope of Practice* that are addressed through each course can help the Provider's organization more clearly define objectives that must be stated on promotional materials and re-addressed in the learning outcomes assessment. Clearly identifying and stating these objectives can also inform the needs assessment procedures and overall program evaluation.

b. CMTE Course Certificate

The following information must be included on all certificates presented to participants upon receipt of approved CMTE credit. AP logos may also be included. Certificates may not be awarded by the AP representative until learning objectives have been met and documented.

- 1) Title of CMTE Course
- 2) Date of CMTE Course
- 3) Name of CMTE Course Sponsor/Provider
- 4) Participant's Name
- 5) Name(s) of Instructor(s)
- 6) Number of CMTEs Awarded
- 7) Signature of the Approved Provider's Continuing Education Director, **not** the Instructor
- 8) The statement of relationship to CBMT as printed below:
[Title of Course] is approved by the Certification Board for Music Therapists (CBMT) for [# of CMTEs] Continuing Music Therapy Education credits. Credits awarded by CBMT are accepted by the National Board for Certified Counselors (NBCC). The [CBMT Approved Provider Name, Provider Number] maintains responsibility for program quality and adherence to CBMT policies and criteria.
- 9) Additional statement at bottom of certificate as printed below:
Completion of this course does not ensure that the participant is currently a Board Certified Music Therapist (MT-BC). Verify music therapy board certification status at www.cbmt.org.

c. CMTE Course Evaluation Form

All MT-BC participants are required to complete the standardized CMTE Course Evaluation Form at the end of each course offered. Insert the specific learning objectives from the CMTE Course Description Form so that participants can identify whether or not, in their opinion, the course met these objectives.

d. NEW: CMTE Course Evaluation Summary Form

Within 30 days of completion of each course, the AP will submit to the CBMT office the standardized CMTE Course Evaluation Summary Form of all MT-BC course participants' responses. This summary form contains valuable feedback for both the Approved Provider and for the presenter(s). During audit randomly selected summary forms will be requested for review.

e. Promotional Materials

The following information must be included in main promotional source.

- 1) **Learning Objectives:** Specific areas and items from the current *CBMT Scope of Practice* must be identified for each course and stated in simple measurable terms. Although many learning objectives may be stated, at least one statement must be included relating the topic and learning objectives to the *CBMT Scope of Practice*. For example, if offering a CMTE on the use of music therapy for pain management, a sample learning objective could be: “Participants will be able to identify at least two music therapy interventions for pain remediation.” (*CBMT Scope of Practice* II.A.2.x)
- 2) **Prerequisites, if any:** Skills, experience, or credentials that are prerequisite to participation.
- 3) **Qualifications and Credentials:** A short description of the qualifications, credentials, and background of instructors. This may be brief; however, the instructor’s name with degree designations (e.g., “Jane Doe, PhD, MT-BC”) is not sufficient representation of an instructor’s qualifications.
- 4) **Course Schedule and Format:** The schedule and format for each course needs to include the start and end time, as well as scheduled breaks. Breaks must be taken into account when determining the number of CMTE credits that will be awarded. Format of the workshop is to be described in general terms (i.e., experiential, lecture, media presentation, music making, seminar discussion, etc.).
- 5) **Number of CMTE Credits Offered:** The AP must state the number of CMTE credits to be granted to participants. One CMTE is equal to 50 minutes of interaction with the learning material. Sufficient depth and intensity of experience is considered essential to effective continuing education. For meaningful learning to occur, the learner must have continual, sustained contact of adequate duration with the facilitator and materials of the learning experience. For this reason, courses must be a minimum of 3 CMTEs (or 2 hours and 30 minutes in length). Always round down to the nearest full CMTE. No partial credits are permitted. For example, a course that involves 165 minutes of total contact time would equal 3.3 CMTE credits. However, partial credit is not granted, thus participants would earn 3 CMTE credits.
- 6) **Course Cost:** Participant fees must be clearly indicated along with a detailed list of items included in the fee and any submission deadline(s).
- 7) **Cancellation and Refund Policy:** A statement explaining under what circumstances the workshop may be canceled and under what conditions a participant may be entitled to a full or partial refund of workshop fees is required—partial CMTE credit cannot be granted.
- 8) **Statement of relationship to CBMT:** The following statement must appear in promotional materials and on certificates:

[Title of Course] is approved by the Certification Board for Music Therapists (CBMT) for [# of CMTEs] Continuing Music Therapy Education credits. Credits awarded by CBMT are accepted by the National Board for Certified Counselors (NBCC). The [CBMT Approved Provider Name, Provider Number] maintains responsibility for program quality and adherence to CBMT policies and criteria.

f. Participant Reporting Form

It is the Provider's responsibility to ensure completion and submission of the Participant Reporting Form for each CMTE course. A completed Participant Reporting Form must be submitted to the CBMT office within 30 days of the completion of each course. Do not include names of participants who did not receive CMTE credits.

Please submit the form from page 30, which includes the following information:

- 1) Name of CBMT Approved Provider and AP Number
- 2) CMTE course title
- 3) Number of CMTE course credits awarded
- 4) *CBMT Scope of Practice* areas addressed (e.g., II.A.2.aa & ab)
- 5) Instructor(s) name(s)
- 6) Date(s) of CMTE course
- 7) Total number of CMTE certificates issued
- 8) Certification number and full name (first and last) of each MT-BC participant

NOTE: The completed Participant Reporting Form must be legible or it will be returned to the Provider. This requirement serves to protect individual MT-BCs by increasing accuracy during audits. **However, it is the responsibility of MT-BC certificants to submit all credits claimed for continuing education to the CBMT office.**

Five-Year Application

At the end of the two-year provisional Approved Provider cycle and in conjunction with five-year application, the AP will participate in a mandatory [audit](#) of courses offered during the provisional period. Upon successful completion of the audit and application, the provisional AP is granted five-year Approved Provider status. Another audit will occur randomly during an AP's first five-year cycle. After completing this first five-year cycle successfully, the AP may apply for continued five-year status by completing the brief five-year application which informs CBMT of any organizational changes that may have occurred and verifies compliance with all CBMT Approved Provider policies and procedures. After the first five-year cycle, audits will occur randomly, at least once every ten years.

Status Maintenance Requirements

Course Requirements for Maintaining Approved Provider Status: The following 4 items are to be submitted to the CBMT office for each CMTE course by the following deadlines:

1. **Promotional Materials:** It is the Provider's responsibility to ensure that email attachments of all promotional materials or advertisements related to CMTE courses are sent to the CBMT office before they are released to the public. The CBMT office must receive promotional materials prior to the event. All required promotional information needs to be included in the Approved Provider's major promotional medium used to advertise a CMTE course, whether that medium is a hard copy brochure or the Provider's website. Postcards or email reminders of an up-coming course may contain less detailed information and refer the reader to the Provider's website for complete information. Providers may find the Promotional Materials Checklist helpful in compiling the required information.
2. **Payment of Fees** A \$75 fee per year is required for each course offered for CMTE credit, regardless of the number of times it is offered each year (i.e., whether a course is offered once or

ten times during the year, the annual course fee is \$75 total). Fees for Standardized Self-Study courses are due annually, upon completion of the course by the first MT-BC participant, with payment plans available upon request. Payment of the fees for all other courses must be submitted to the CBMT office 14 days prior to the date the course begins. CBMT Approved Providers will be fined \$100 for fees not received by the date the course begins. If a course is cancelled, it is the responsibility of the Provider to contact the CBMT office for a refund.

3. **CMTE Course Evaluation Summary Form**: Submit completed summary of MT-BC responses to the CBMT office within 30 days of the completion of each course.
4. **Participant Reporting Form**: Submit completed form containing names of MT-BCs receiving CMTE credits to the CBMT office within 30 days of the completion of each course. Do not include names of participants who did not receive CMTE credits.

Required Audit Documentation: Items 1-4 are to be completed for each CMTE course and will be required for audit (see page 8):

1. **CMTE Course Description Form**, including how learning outcomes will be measured and documented
2. **CMTE Course Certificate**
3. **CMTE Course Evaluation Summary Form**, including documentation of learning outcomes measurement for participants
4. **Resumes or vitae of presenters**

Application Time Lines and Late Fees

The Continuing Education Committee (CEC) is responsible for reviewing all application materials. The CEC makes every effort to review applications promptly. However, please allow 6-8 weeks from the date applications are received by the CBMT Office for the CEC Chair to contact your organization regarding approval status. An AP applicant may request an expedited review within 14-30 days for an additional \$100 expedited review fee.

Providers will receive notification when renewal applications are due. A \$100 late fee will be charged for applications not submitted by the due date. The CEC may request that materials submitted for renewal be revised to meet CBMT Approved Provider requirements. When requested, revised materials must be resubmitted within 30 days of the CEC request. Providers who fail to submit requested materials and complete the renewal application successfully by their cycle expiration date will forfeit the application fee, and CBMT Approved Provider status will be revoked. To be reinstated as an Approved Provider, the organization may reapply for Two-Year Provisional status.

QUICK REFERENCE SECTION

For each CMTE course, submit to CBMT office:

1. [Promotional Materials](#): submit prior to release to the public.
2. \$75 Fee: submit at least 14 days prior to course. Include [late fee](#) of \$100 for a total of \$175 if paid after the course begins.
3. [CMTE Course Evaluation Summary Form](#): submit completed summary of MT-BC responses within 30 days of completion of course.
4. [CMTE Participant Reporting Form](#): submit within 30 days of completion of course.

For each CMTE course, compile and file for [audit](#):

1. Presenters' résumés or vitae
2. [CMTE Course Description Form](#)
3. [CMTE Course Certificate](#)
4. [CMTE Course Evaluation Forms](#) completed by participants. Do not submit these forms for audit unless requested by CBMT reviewers.
5. [CMTE Course Evaluation Summary Form](#) completed by AP

Within 30 days of revisions or changes, inform CBMT office of any of the following changes:

1. AP Continuing Education Director and/or AP's contact information (see CBMT AP website page at www.cbmt.org for current name and contact information)
2. Mission Statement
3. Grievance Policies and Procedures
4. Criteria for selecting qualified instructors
5. CMTE Certificate Template

Glossary

CBMT Approved Provider: An institution, agency or association that is approved by CBMT to issue CMTE credit to certificants for participation in continuing education courses.

CBMT Code of Professional Practice: The document by which all board certified music therapists and examination candidates must abide in relation to their professional practice. This document provides the enforceable means of revoking the credential or taking disciplinary action against a certificant should protection of the public require such action.

CBMT Scope of Practice: The document which defines the current knowledge and skills necessary to practice in the music therapy profession. It is the outline of categories covered on the CBMT examination. The *CBMT Scope of Practice* is the product of a practice analysis which is conducted every 5 years.

Certificant: A board certified music therapist (MT-BC).

Certification Number (or Certificate Number): Number that is assigned to each MT-BC. This number is listed on the official (CBMT seal affixed) certificate and wallet card distributed to every MT-BC upon passing the CBMT Examination. This number is listed by Approved Providers on CMTE Participant Reporting Forms, and can be found at www.cbmt.org by completing a search for Board Certified Music Therapists.

Clock hour: One clock hour equals 60 minutes. This is differentiated from a contact hour during a course which is 50 minutes. (See **Contact hour**)

CMTE: Continuing Music Therapy Education. A recertification option in which certificants accrue 100 recertification credits in accordance with the CBMT requirement options. CMTE represents recertification credits which are specifically continuing education credits.

CMTE Approved Provider Course: Any one of a variety of courses, trainings, conferences, seminars, and workshops offered by an Approved Provider for CMTE credit. There are three categories of CMTE courses: general, standardized self-study, and specialty CMTE courses.

CMTE Course Certificate: Certificate awarded to certificant upon successful completion of the learning objectives of the course. See pages 11 and 25.

CMTE Course Description Form: Form required for each CMTE course, and submitted upon request during audit. See pages 10-11 and 24.

CMTE Course Evaluation Form: Form to be completed by each participant of CMTE course. See pages 11 and 26-27.

CMTE Course Evaluation Summary Form: Compilation of CMTE Course Evaluation Form results (from MT-BCs' forms only) to be submitted to CBMT office by the Approved Provider within 30 days of course completion. See pages 11 and 28-29.

CMTE Participant Reporting Form: Attendance record that is sent to the CBMT office by the Approved Provider within 30 days of CMTE course completion. See pages 13 and 30-31.

CMTE Promotional Materials Checklist: Reference list of items required for website, email, and/or hard copy promotions. See pages 12 and 33.

Computation of CMTE Credits: A CMTE credit is equal to one 50-minute hour of direct coursework or contact. Contact hours are calculated from clock hours (60 minutes). For example, 3 clock hours (180 minutes) is divided by 50 to equal 3.6 contact hours or 3 CMTE credits. CMTE credits are not granted in units smaller than 1 credit. Fractions of hours are rounded down (e.g. 3.6 contact hours would be recorded as 3 CMTEs). (See **Clock Hour, Contact Hour**)

Contact Hour: 50 minutes spent in Continuing Music Therapy Education, Professional Development, and Professional Service activities; a single recertification credit.

Content Area: A specific category within the current *CBMT Scope of Practice* (e.g. Assessment and Treatment Planning; Treatment Implementation and Termination; On-going Documentation and Evaluation of Treatment; Professional Development and Responsibilities).

Continuing Education Director: Person designated by an Approved Provider to correspond with the CBMT Continuing Education Committee and staff, to submit required AP materials and documents, and to be the responsible representative of the AP for ensuring quality of CMTE courses and adherence to the CBMT policies and criteria as stated in the Approved Provider Manual.

Co-Sponsor: An individual, group, or organization that presents or provides a venue for a CMTE course under the sponsorship of an Approved Provider. A co-sponsor adheres to all CBMT policies and criteria as stated in the *Approved Provider Manual*, and submits all documentation to the sponsoring AP.

Co-sponsorship: The act of extending CBMT Approved Provider status to a cooperating individual or organization for the purpose of granting CMTE credits. In a co-sponsorship agreement, the CBMT Approved Provider assumes all responsibility for the quality of the CMTE course and for adherence to the CBMT policies and criteria as stated in the *Approved Provider Manual*.

Five-Year Status: A designation given to an organization approved by the CBMT to offer continuing education courses for CMTE credit. Five-year status is granted upon satisfactory completion of two-year provisional status and upon renewal at the end of each five-year cycle.

General Courses: CMTE courses offered at AMTA national and regional conferences, as well as a variety of individually designed workshops, presentations, courses, trainings, conferences, and seminars offered by CBMT Approved Providers for CMTE credit. General courses can also include interactive, non-standardized, online/distance learning experiences.

Learning Objectives: Identified objectives of a CMTE course that are related to specific areas and items of the *CBMT Scope of Practice*. Objectives are stated in simple, measurable terms.

Learning Outcomes: Measurable assessments of CMTE participants' learning that address the learning objectives for the course.

MT-BC: Music Therapist-Board Certified. (See **Certificant**)

Needs Assessment: The process used by an Approved Provider to survey and identify the needs and interests of current and potential participants of continuing education courses. Needs assessment tools may include, but are not limited to, written surveys, informed perception of clinicians or employers, survey of music therapy consumer needs, or peer review.

Practice Analysis: The practice analysis provides the means for defining and measuring current practice in the field of music therapy. It is conducted every five years in cooperation with CBMT's testing firm and a team of chosen experts in the field. The practice analysis process entails: 1) review by the team of the current identified tasks, 2) development of an extensive survey completed by MT-BCs in which they identify the importance of each task related to safe, competent practice, 3) review and statistical analysis of the data by the team under the careful guidance of the testing firm, and 4) the consequent update of

identified job tasks. This arduous process results in a detailed job description or scope of practice that is then used to measure competency through examination. In a rapidly growing field such as music therapy, the practice analysis process assures the public that every five years job descriptions are refined through a psychometrically sound procedure to ensure safe competent provision of services.

Recertification: The process by which board certification is maintained by an MT-BC. There are two methods from which the certificant may choose: 1) taking the CBMT examination again, or 2) accumulating 100 recertification credits within each five-year recertification cycle.

Recertification Cycle: A period of five years during which the MT-BC (certificant) works towards recertification.

Résumé: A brief (3 pages or less) and current (updated within the last year) account of an instructor's personal, educational and professional qualifications and experience related to the course being offered. Minimum content required: education, certifications, qualifications, and special training, professional work experience, and presentations.

Standardized Self-Study: A pre-designed, programmed course of study relating to specific areas of the *CBMT Scope of Practice*. Standardized self-study courses can be created and presented in various formats including computer, video, audio, paper, distance learning, etc. See page 6.

Two-Year Provisional Status: The initial designation given to an organization when approved by CBMT to offer continuing education courses for CMTE credit. Two-year status is granted to those organizations participating in the CBMT continuing education process for the first time, upon completion and successful review of the CBMT Two-Year Provisional Application.

Vita: a brief biographical résumé of one's career and training, see **Résumé**.



THE CERTIFICATION BOARD
FOR MUSIC THERAPISTS

CBMT Approved Provider Two-Year Provisional Application

The Certification Board for Music Therapists

506 E. Lancaster Avenue, Suite 102

Downingtown, PA 19335

1.800.765.2268, ext. 23

Instructions to Applicants:

Please refer to the *CBMT Approved Provider Manual, Fifth Edition* to assist you in preparing this application. The information you provide will be used to determine whether your organization meets the criteria for approval. Incomplete applications will not be reviewed. Be specific, but brief. Cut and paste your responses into the body of the application below and clearly label requested supplementary attachments. Page numbers in parentheses reference relevant information in the *AP Manual*. Please note the additional processing fee if you submit hard copy application. If you would like to request a mentor from the Continuing Education Committee to guide you through this process, please contact the CBMT Continuing Education Coordinator at the toll-free number above.

Applications may be submitted electronically or as hard copies.

Electronic Submission (recommended)

1. Email this completed application with attachments to the CBMT Continuing Education Coordinator at edarigan@cbmt.org.
2. Mail one complete hard copy with attachments, signature, and the \$250 application fee to the CBMT office.
3. Retain one additional copy for your files.

Hard Copy Submission

1. Mail this original application with attachments, plus three complete copies with attachments (total of four copies) and the \$300 application fee to the CBMT office.
2. Retain one additional copy for your files.

Provider General Information

Name of Organization: _____

Name of Continuing Education Director: _____

Street Address City/State Zip: _____

Phone Number(s): _____

Email Address(es): _____

Website Address: _____

Date Submitted: _____

CMTE Course Planning and Documentation

1. Insert a copy of your organization's Mission Statement, including its relevance to continuing music therapy education. If your organization's Mission Statement does not include a clear connection to continuing music therapy education, please add a statement that addresses this connection. (page 10) _____
2. Insert your organization's grievance policies and procedures for participants of continuing education courses. (pages 10, 32) _____
3. List criteria that will be used to select qualified instructors. (page 10) _____
4. Attachments: Please complete each item listed below and attach to this application. You may wish to use an example of a course that will be offered by your organization to assist you in completing these items:
 - a. [CMTE Course Description Form](#) (pages 10-11 and 24)
 - b. [CMTE Course Certificate](#) (pages 11 and 25)
 - c. [CMTE Course Evaluation Form](#) (pages 11 and 26-27) Data from participant satisfaction, learning objectives outcomes, and needs assessment questions will be compiled in the Course Evaluation Summary Form (pages 11 and 28-29) and submitted after each course.
 - d. Sample promotional flyer or brochure (including a minimum of the items listed in the *CBMT Approved Provider Manual, Fifth Edition* (pages 12 and 33))

Policies and AP Documents Agreement

I have read and agree to comply with the following policies and submission of documents related to CBMT Approved Providers:

- Course Description Form (pages 10-11 and 24)
- Course Certificate (pages 11 and 25)
- Course Evaluation Form (pages 11 and 26-27)
- Course Evaluation Summary Form (pages 11 and 28-29)
- Promotional Materials (*pages 12 and 33*)
- Participant Reporting Form (*pages 13 and 30-31*)
- Payment of Course Fees and Late Fees (*page 14*)
- Documentation Required for Maintaining AP Status and for Audit (*pages 13-15*)
- CBMT Scope of Practice*
- CBMT Code of Professional Practice*
- CBMT Approved Provider Manual, Fifth Edition*
- I agree to protect the anonymity and confidentiality of clients presented in courses and the confidentiality of the course participants in accordance with applicable laws and policies.
- I agree to maintain compliance with the Americans with Disabilities Act of 1990 (PL 101-336).
- I assume all responsibility for the quality of any CMTE courses offered by a co-sponsor through my Approved Provider Number, for adherence by the co-sponsor to the *CBMT Code of Professional Practice* and the *CBMT Approved Provider Manual, Fifth Edition*, and for the collection and maintenance of all required documentation for co-sponsored CMTE courses.

Signature Statement

On behalf of this organization I, the Continuing Education Director, attest that the information stated herein is accurate and factual.

Continuing Education Director: _____ ***Date:*** _____

**** Upon approval your organization will be assigned an Approved Provider number.***



CBMT Approved Provider Five-Year Application

The Certification Board for Music Therapists

506 E. Lancaster Avenue, Suite 102
Downingtown, PA 19335
1.800.765.2268, ext. 23

Instructions to Applicants:

Please refer to the *CBMT Approved Provider Manual, Fifth Edition*, to assist you in preparing this application. The information you provide will be used to determine whether your organization continues to meet the criteria for approval. Incomplete applications will not be reviewed. Be specific, but brief. Include responses in the body of the application and clearly label requested supplementary attachments. Page numbers in parentheses reference relevant information in the *AP Manual*. Please note the additional processing fee if you submit hard copy application. If you would like to request a mentor from the Continuing Education Committee to guide you through this process, or to request a payment plan, please contact the CBMT Continuing Education Coordinator at the toll-free number above.

Applications may be submitted electronically or as hard copies.

Electronic Submission (recommended)

1. Email the application to the CBMT Continuing Education Committee (edarigan@cbmt.org)
2. Mail one complete hard copy with signature and the \$250 application fee to the CBMT office.
3. Retain one additional copy for your files.

Hard Copy Submission

1. Mail the original application plus three copies (total 4 copies) and the \$300 application fee to the CBMT office.
2. Retain one additional copy for your files.

Provider General Information

Name of Organization: _____
Name of Continuing Education Director: _____
Street Address, City, State, Zip: _____
Phone Number(s): _____
Email Address(es): _____
Website Address: _____
Date Submitted: _____

Changes to Course Planning and Documentation

During the past 5-year cycle, did your organization make any changes to the items listed below? Please insert or attach new policy or contact information for each item that is checked "yes).

	Yes	No
1. Continuing Education Director contact information (include update if different from AP listing on CBMT website at www.cbmt.org)	<input type="checkbox"/>	<input type="checkbox"/>
2. Mission Statement (including rationale that describes the inclusion of continuing music therapy education)	<input type="checkbox"/>	<input type="checkbox"/>
3. Grievance Policies and Procedures for participants in continuing music therapy education courses	<input type="checkbox"/>	<input type="checkbox"/>
4. Criteria used to select qualified instructors	<input type="checkbox"/>	<input type="checkbox"/>

Please attach a current copy of AP Course Certificate Template: Template attached

Policies and AP Documents Agreement

I have read and agree to comply with the following policies and submission of documents related to CBMT Approved Providers:

- Course Description Form (pages 10-11 and 24)
- Course Certificate (pages 11 and 25)
- Course Evaluation Form (pages 11 and 26-27)
- Course Evaluation Summary Form (pages 11 and 28-29)
- Promotional Materials (pages 12 and 33)
- Participant Reporting Form (pages 13 and 30-31)
- Payment of Course Fees and Late Fees (page 14)
- Documentation Required for Maintaining AP Status and for Audit (pages 13-15)
- CBMT Scope of Practice*
- CBMT Code of Professional Practice*
- CBMT Approved Provider Manual, Fifth Edition*
- I agree to protect the anonymity and confidentiality of clients presented in courses and the confidentiality of the course participants in accordance with applicable laws and policies.
- I agree to maintain compliance with the Americans with Disabilities Act of 1990 (PL 101-336).
- I assume all responsibility for the quality of any CMTE courses offered by a co-sponsor through my Approved Provider Number, for adherence by the co-sponsor to the *CBMT Code of Professional Practice* and the *CBMT Approved Provider Manual, Fifth Edition*, and for the collection and maintenance of all required documentation for co-sponsored CMTE courses.

Signature Statement

On behalf of this organization, I, the Continuing Education Director, attest that the information stated herein is accurate and factual.

Continuing Education Director: _____ **Date:** _____



CBMT Approved Provider CMTE Course Description Form

CBMT Approved Provider: _____
CMTE Course Title: _____
CMTE Course Date(s): _____
Number of CMTE Credits: _____

LEARNING OBJECTIVES	CBMT SCOPE OF PRACTICE
<i>Identify what participants will learn from this course. Each objective must include a measurable verb.</i>	<i>Identify the most relevant CBMT Scope of Practice item(s) (1 or 2) that correspond to each specific learning objective listed in the column on the left.</i>

ABSTRACT (250 word limit)

Please provide detailed information of material to be presented in this course, including course schedule and format. Include enough detail so that the reviewers will easily know what will be presented. In addition, please describe your method for evaluating and documenting what participants learned from this course (i.e., learning outcomes). This must, at minimum, consist of the [CMTE Course Evaluation Form](#), but can also include additional assessment method(s) the AP determines appropriate for the course content (e.g., experiential in nature within the course, a self-graded oral group review led by the presenter, written pre- and post-tests, or another appropriate assessment method).

**CBMT Approved Provider
CMTE Course Certificate Template**

[Name of CBMT Approved Provider]

certifies that

(Participant's Name)

has earned ____ CMTE credits
for successful completion of

(Title of CMTE Course)

Name of Instructor

Course Date(s)

Signature of Continuing Education Director

[Title of Course] is approved by the Certification Board for Music Therapists (CBMT) for [# of CMTEs] Continuing Music Therapy Education credits. Credits awarded by CBMT are accepted by the National Board for Certified Counselors (NBCC). The [CBMT Approved Provider Name, Provider Number] maintains responsibility for program quality and adherence to CBMT policies and criteria.

**Completion of this course does not ensure that the participant is currently a
Board Certified Music Therapist (MT-BC).
Verify music therapy board certification status at www.cbmt.org.**



CBMT Approved Provider CMTE Course Evaluation Form

Approved Provider:

CMTE Course Title:

Course Date(s):

Instructor(s):

Rating Scale: Excellent = 4, Good = 3, Fair = 2, Poor = 1

Please rate the instructor(s):

Presentation style	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Knowledge of subject and clarity	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Interaction with participants	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>

Please rate the CMTE content:

Quality of relevant information	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Quantity of relevant information	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>
Organization of material	4 <input type="checkbox"/>	3 <input type="checkbox"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>

Please select “yes” or “no” to indicate whether or not, in your opinion, the specific learning objectives for this course were met:

<i>(Insert Learning Objective 1)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>(Insert Learning Objective 2)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>(Insert Learning Objective 3)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>(Insert Learning Objective 4)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Comments: _____

Please select “yes” or “no” to answer the following questions:

Was the physical environment conducive to learning?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Was the length of the program appropriate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Was the amount of material presented sufficient?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Were my educational needs and expectations met?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

1. What information presented in this CMTE course was most useful to your practice?

2. This CMTE course could be improved by:

3. Please suggest topics for future CMTE courses.

(Check one)

Board-Certified Music Therapist (MT-BC)

Non MT-BC

Thank you for your participation in our evaluation.

OPTIONAL

Name & Affiliation:



THE CERTIFICATION BOARD
FOR MUSIC THERAPISTS

CBMT Approved Provider CMTE Course Evaluation Summary Form

Approved Provider: _____

AP Number: _____

CMTE Course Title: _____

Course Date(s): _____

Instructor(s): _____

Number of MT-BC participants who submitted a Course Evaluation Form: _____

Number of MT-BC participants who successfully completed this course and received a CMTE certificate: _____

Note to APs: *Within 30 days of completion of each course and when audited, please submit this brief written summary of CMTE Course Evaluation Form results for each CMTE course. Do not submit original completed CMTE Course Evaluation forms unless requested.*

Rating Scale: Excellent = 4, Good = 3, Fair = 2, Poor = 1

Please identify how many MT-BC participants gave each rating number (1-4) to the instructor(s) for each rated item below:

Rated item	Rating Score	# of Participants	Rating Score	# of Participants	Rating Score	# of Participants	Rating Score	# of Participants
Presentation style	4	_____	3	_____	2	_____	1	_____
Knowledge of subject and clarity	4	_____	3	_____	2	_____	1	_____
Interaction with participants	4	_____	3	_____	2	_____	1	_____

Please identify how many MT-BC participants gave each rating number (1-4) for the specific CMTE content information below:

Rated item	Rating Score	# of Participants	Rating Score	# of Participants	Rating Score	# of Participants	Rating Score	# of Participants
Quality of relevant information	4	_____	3	_____	2	_____	1	_____
Quantity of relevant information	4	_____	3	_____	2	_____	1	_____
Organization of material	4	_____	3	_____	2	_____	1	_____

For each specific learning objective, please identify how many MT-BC participants responded that the objective was met (“yes”) or not met (“no”):

Specific Learning Objectives	Yes	No
(Insert Learning Objective 1)		
(Insert Learning Objective 2)		
(Insert Learning Objective 3)		
(Insert Learning Objective 4)		

For each question below, please identify how many MT-BC participants responded “yes” or “no”:

	Yes	No
Was the physical environment conducive to learning?		
Was the length of the program appropriate?		
Was the amount of material presented sufficient?		
Were my educational needs and expectations met?		

1. What information presented in this CMTE course did MT-BC participants identify as most useful in their practices?
2. How did MT-BC participants indicate that this CMTE course could be improved?
3. What topics did MT-BC participants suggest for future CMTE courses?



THE CERTIFICATION BOARD
FOR MUSIC THERAPISTS

CBMT Approved Provider CMTE Participant Reporting Form

CBMT Approved Provider: _____
AP Number: _____
CMTE Course Title: _____
CMTE Course Date(s): _____
Instructor(s): _____
CBMT Scope of Practice Area(s): _____

Number of CMTE Course Credits Awarded on the Certificate: _____
Total Number of CMTE Certificates Issued: _____

	Certification Number	Last Name	First Name
1			
2			
3			
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CBMT Approved Provider Guidelines for Grievance Policy and Procedure

- I. Identify where the Approved Provider Grievance Policy can be found by participants, e.g. website, hard copy at registration table, etc.

- II. A Grievance Policy must include:
 - A. The mission and purpose of the organization specific to Continuing Music Therapy Education (CMTE)

 - B. Grievance Procedures
 1. Statement of participant's right to file a grievance
 2. Content of grievance, i.e., aspects of the Provider's continuing education program covered by the policy
 3. Outline of procedure and timelines for participant to follow, i.e., whom to contact and by what means (letter, e-mail), within how many days/weeks from completion of course
 4. Outline of procedure that the Approved Provider will follow in response to a grievance, including timeline for response to occur

 - C. Appeal Procedures
 1. Statement of participant's right to appeal decisions made by Approved Provider regarding grievance
 2. Outline of procedure for participant to follow in filing an appeal, i.e., whom to contact and by what means (letter, e-mail) within a defined period of time
 3. Outline of procedure the Approved Provider will follow in response to an appeal, including timeline for response to occur
 4. Statement of participant's right to have an unresolved grievance addressed by CBMT's Continuing Education Committee. (NOTE: This should occur only after the Provider's Grievance Procedure has been exhausted.)



CBMT Approved Provider CMTE Promotional Materials Checklist (for quick reference)

- Learning Objectives Yes No
- Prerequisites Yes No N/A
- Qualifications & Credentials Yes No
- Course Schedule & Format Yes No
- Number of CMTEs Offered Yes No
- Can Correct Number of CMTEs
Be Calculated from Course Schedule Yes No
- Course Cost Yes No N/A
- Cancellation & Refund Policy Yes No
- Statement of Relationship: Yes No

[Title of Educational Activity] is approved by the Certification Board for Music Therapists (CBMT) for [# of CMTEs] Continuing Music Therapy Education credits. Credits awarded by CBMT are accepted by the National Board for Certified Counselors (NBCC). The [CBMT Approved Provider Name, Provider Number] maintains responsibility for program quality and adherence to CBMT policies and criteria.