

## **Professional Licensure Committee Hearing**

*House Bill 1356: Licensure of Professional Music Therapists under the  
Social Workers, Marriage and Family Therapists and Professional  
Counselors Act*

Testimony submitted by:

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Chairman Burns, Chairman Metzgar, and members of the Professional Licensure Committee, thank you so much for allowing me the time to speak with you today.

I am Meredith Mills, the president and CEO of Country Meadows Retirement Communities and Lifesong Hospice. I'm testifying before you today as an advocate for the almost 3,000 residents I serve through my family's mission of caring for seniors for over five decades. That mission has been guided by my grandfather, former Pennsylvania governor, George Leader, who taught me much of what I know about providing senior care — and more importantly, taught me the importance of speaking up for those who cannot advocate for themselves.

I have had the honor and emotionally taxing task of learning the life stories of our residents and prospective residents for more than a decade. One of the most impactful stories was of a man I never got to meet, but whose life I learned about through pages of hospital notes that I read while trying to discern whether we could admit and support him — and what kind of support he was already receiving.

This patient, who had unstable physical health needs, was being refused by many providers. As a result, he ended up living in the hospital for several months. During this time, while the clinical team of nurses, physical therapists and doctors were trying to stabilize his physical needs — including seizure-like spells and a complicated cancer diagnosis — a parallel team of art and music therapists was trying to support his emotional needs, which were also playing a role in his ability to heal.

At this time in my career, I had little experience with music therapy, so I had the same misnomer that many do — that a music therapist is simply playing music to calm or entertain the patient. But I learned when reviewing this patient's notes that while battling his physical conditions, he was also benefiting from music, through performance and improvisation, in ways that directly impacted his mood, participation, and improvement in his health status.

The music therapist was able to utilize music to uncover past trauma, as this gentleman shared that on his wedding day, as an 18-year-old young man, he was driving with his fiancé to their ceremony when another driver hit their car, killing his bride-to-be. Decades later, having never married or had a family, he was forever affected by that tragic day, and was now emotionally triggered by hearing the song they both loved that reignited those traumatic memories.

But therapy is about healing, no matter the age. A board-certified music therapist was able to assist this patient in processing the trauma, grief, and loss that arose from the memory triggered by that song. And thanks to extensive education, a six-month internship that included 1200 clinical hours worked, and ongoing clinical education requirements, the therapist had the expertise to provide such complex, trauma-informed care.

Without a licensed and regulated music therapy program, a patient like this could have been exposed to even more harm from this experience. All therapeutic encounters carry possible

risks. In fact, a certain level of risk-taking is necessary for any significant and enduring change to occur. However, you wouldn't want to process a traumatic life event such as this while receiving cognitive behavioral therapy from an unlicensed therapist — and music therapy is no Different.

When we launched hospice services for our assisted living residents almost 5 years ago, we learned that music therapy is not covered in the hospice Medicare benefit, but we understood its value in supporting patients processing loss and challenged with multiple chronic diseases and dementias. It very perfectly supports our hospice's mission — to honor legacies with grace — and so we utilized funds from our not-for-profit foundation to employ a music therapist to support all patients during their final verse. Our hospice is, ironically, called Lifesong.

Lifesong's music therapy program is developed and provided by a board-certified — but not Licensed — music therapist. The program includes patient assessment, individualized care planning, and clinical application of music, which has been proven to increase antibodies, decrease cortisol (the primary stress hormone), and release endorphins, in turn improving mood while also decreasing pain and agitation.

Our music therapist is no different from any of our nurses or social workers in terms of her assessment, application, and documentation of outcomes of treatment. However, her approach, expertise, and training are vastly different from what can be provided by a musical entertainer or untrained and unlicensed musical provider.

Due to the high prevalence of dementia in the population we serve, a certified music therapist's training on indications of agitation triggered by music content or volume and ability to adapt is critical. I can think of a particular resident whom I had the honor to work with, and when her anxiety and confusion would increase, our co-workers had an iPod with headphones at the ready to provide her with her favorite songs from 'The Sound of Music.' Rather than having outbursts or negative behaviors that would affect her and others in a community setting, this seemingly insignificant resource provided a positive and meaningful intervention that directly impacted the quality of life for many.

Using music as a device for coping with both physical and socio-emotional healing and support without a high level of therapeutic training is not only likely to be ineffective, it's negligent and potentially harmful. The Commonwealth and its regulatory bodies should oversee and ensure that this therapeutic treatment is applied only by those trained and licensed to do it with expertise and efficacy. I thank Rep. Pashinski for sponsoring this bill, and offer my support of HB 1356, so that music therapists are offered the same licensure as similarly trained and vetted social workers and family counselors. Licensure of music therapists is a basic request, but by doing so, we also legitimize and further support the potential reimbursement of this healing service on a broader level.

The aging population of Pennsylvania is continuing to grow at an exponential pace. Although music therapists support patients of all ages, I am here to advocate heavily on behalf of the

older adults of our commonwealth. Having observed the positive impact of music therapists on this population, as well as read the statistics on the reduction of health care costs to our system due to their interventions, I ask that you support the formal licensure and regulation of music therapists in our state to further our ability to protect the health and wellbeing of all who live here. Thank you.