

SENATE BILL REPORT

2SHB 1724

As of March 30, 2023

Title: An act relating to increasing the trained behavioral health workforce.

Brief Description: Increasing the trained behavioral health workforce.

Sponsors: House Committee on Appropriations (originally sponsored by Representatives Bateman, Macri, Taylor, Berry, Tharinger, Slatter, Callan, Leavitt, Reed and Shavers).

Brief History: Passed House: 3/4/23, 95-0.

Committee Activity: Health & Long Term Care: 3/23/23, 3/28/23 [DPA-WM].
Ways & Means: 3/30/23.

Brief Summary of Amended Bill

- Reduces requirements for licensure or certification for certain behavioral health professionals.
- Directs the Department of Health (DOH) to develop and enact emergency rules by July 1, 2024, to remove barriers to licensure and streamline and shorten the credentialing process.
- Directs DOH to establish a stipend program for behavioral health associates to defray expenses related to supervision and unpaid internships.
- Requires disciplinary authorities under the Uniform Disciplinary Act to waive licensure requirements for some out-of-state license holders and allows them to waive requirements for individuals who hold a national certification.
- Allows disciplinary authorities to contract out review of applications for licensure or temporary practice.
- Establishes certification and licensure paths for agency-affiliated counselors with an expanded scope of practice.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Majority Report: Do pass as amended and be referred to Committee on Ways & Means.

Signed by Senators Cleveland, Chair; Robinson, Vice Chair; Rivers, Ranking Member; Muzzall, Assistant Ranking Member; Conway, Dhingra, Holy, Padden, Randall and Van De Wege.

Staff: Kevin Black (786-7747)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Monica Fontaine (786-7341)

Background: Many types of health providers are licensed to perform behavioral health services, including psychologists, substance use disorder professionals, advanced social workers, independent clinical social workers, mental health counselors, and marriage and family therapists.

Psychologists. A psychologist is authorized to observe, evaluate, interpret, and modify human behavior by the application of psychological principles, methods, and procedures for the purposes of preventing or eliminating symptomatic or maladaptive behavior and promoting mental and behavioral health. To be a licensed psychologist, a person must hold a doctoral degree in psychology, have at least two years of supervised experience, pass an examination, and be of good moral character.

Substance Use Disorder Professionals. A substance use disorder professional is authorized to employ the core competencies of substance use disorder counseling to assist or attempt to assist individuals with substance use disorder in their recovery. To be a certified substance use disorder professional, a person must complete an educational program, an apprenticeship program, or alternative training. The person must also pass an examination and complete a supervised experience requirement.

Advanced Social Workers. An advanced social worker is authorized to apply social work theory and methods, including emotional and biopsychosocial assessment, psychotherapy under the supervision of another mental health professional, case management, consultation, advocacy, counseling, and community organization. To be an advanced social worker, a person must graduate from a master's or doctorate level social work educational program accredited by the Council on Social Work Education, pass an examination, and complete at least 3200 hours of supervised experience. The supervised experience hours must include at least 90 hours of direct supervision by a independent clinical social worker, an advanced social worker, or an equally qualified mental health professional. At least 50 of the 90 hours must be supervised by a licensed advanced social worker or independent clinical social worker.

Independent Clinical Social Workers. An independent clinical social worker is authorized to perform the same services as an advanced social worker. The independent clinical social worker may also diagnose and treat emotional and mental disorders based on knowledge of human development, the causation and treatment of psychopathology, and psychotherapeutic treatment practices. To be an independent clinical social worker, a person must graduate from a master's or doctorate level social work educational program accredited by the Council on Social Work Education, pass an examination, and complete at least 4000 hours of supervised experience over a period of at least three years. At least 130 of the 4000 hours must be supervised by a licensed mental health practitioner. At least 70 of the 130 hours must be under the supervision of an independent clinical social worker.

Mental Health Counselors. A mental health counselor is authorized to apply principles of human development, learning theory, psychotherapy, group dynamics, and etiology of mental illness and dysfunctional behavior to individuals, couples, families, groups, and organizations, for the purpose of treatment of mental disorders and promoting optimal mental health and functionality. Mental health counseling also includes the assessment, diagnosis, and treatment of mental and emotional disorders, as well as the application of a wellness model of mental health. To be licensed as a mental health counselor, an applicant must graduate from a master's or doctoral program in mental health counseling or a related discipline, pass an examination, and complete a supervised experience requirement of at least 36 months or 3000 hours.

Marriage and Family Therapists. A marriage and family therapist is authorized to diagnose and treat mental and emotional disorders within the context of relationships, including marriage and family systems. To be licensed as a marriage and family therapist, a person must graduate from a master's or doctoral program in marriage and family therapy or equivalent allied field, pass an examination, and complete a supervised experience requirement consisting of two calendar years of full-time marriage and family therapy totaling at least 3000 hours.

Probationary Licenses. The Department of Health (DOH) grants probationary licenses to applicants from other states who seek a credential in Washington as a psychologist, substance use disorder professional, advanced social worker, independent clinical social worker, mental health counselor, or marriage and family therapist. A person with a probationary license may only practice in a behavioral health agency.

Associate Licenses. An associate license is a trainee license for a social worker, mental health counselor, or marriage and family therapist who is working to accumulate supervised experience hours towards full licensure but has completed other requirements, including a background check by DOH.

Disciplinary Authorities Under the Uniform Disciplinary Act. The Uniform Disciplinary Act (UDA) provides consolidated disciplinary and licensure procedures for health-related professions in Washington. The disciplinary authority for a health-related profession may be

DOH or it may be a board or commission. Professions subject to disciplinary authority under the UDA include dispensing opticians, midwives, ophthalmologists, massage therapists, dental hygienists, acupuncturists, radiologic technologists, x-ray technicians, respiratory care practitioners, hypnotherapists, mental health counselors, marriage and family therapists, social workers, nursing pool operators, nursing assistants, dietitians, nutritionists, substance use disorder professionals, sex offender treatment providers, emergency medical care workers, paramedics, orthotists, prosthetists, surgical technologists, recreational therapists, animal massage therapists, athletic trainers, home care aides, genetic counselors, reflexologists, medical assistants, behavioral analysts, podiatrists, chiropractors, dentists, audiologists, nursing home administrators, optometrists, osteopathic physicians, pharmacists, physicians, physician assistants, physical therapists, occupational therapists, nursing care practitioners, psychologists, veterinarians, naturopaths, and denturists.

Summary of Amended Bill: Changes to Requirements for Licensure for Behavioral Health Professions. The supervised experience requirement for social worker licensure is reduced from 3200 hours for an advanced social worker or 4000 hours for a independent clinical social worker to 3000 hours. For advanced social workers, a requirement that at least 50 hours must include supervision by a licensed advanced social worker or licensed independent clinical social worker is removed. For independent clinical social workers, the minimum supervision period is reduced from three to two years, and the hours of direct supervision by a licensed mental health practitioner are reduced from 130 to 100 hours.

A requirement for a marriage and family therapist to undergo a minimum of two calendar years of full-time marriage and family therapy experience is removed.

A social worker may be licensed based on a doctorate obtained from a university accredited by a recognized accrediting organization if the doctoral program is not accredited by the Council on Social Work Education.

Probationary Licenses. A person with a probationary license as a psychologist, social worker, mental health counselor, marriage and family therapist, or substance use disorder professional may practice outside a behavioral health agency.

Examination of Licensure Requirements and Rulemaking. DOH, in consultation with the Workforce Training and Education Coordinating Board and the Examining Board of Psychology, must examine licensure requirements for social workers, marriage and family therapists, mental health counselors, substance use disorder professionals, and psychologists to identify changes to statutes and rules that would remove barriers to entering and remaining in the health care workforce and to streamline and shorten the credentialing process. DOH must consider peer reviewed research, promotion of reciprocity, adoption of interstate compacts, creation of an associate license for psychologists, whether agency affiliated counselors should be employed in federally qualified health centers, and other topics. A preliminary report is due on November 1, 2023, with a final report on November 1, 2024.

DOH and the Examining Board of Psychology must adopt emergency rules by July 1, 2024, to implement changes to licensing requirements to remove barriers to entering and remaining in the healthcare work force and to streamline and shorten the credentialing process for behavioral health professions. Permanent rules must be adopted by July 1, 2025.

Program to Support Associate Behavioral Health Professionals. Subject to funding, DOH must develop a program to facilitate placement of associates with clinical supervision services by October 1, 2023, which includes a stipend program to defray the out-of-pocket expense for associates of completing the supervised experience requirements. DOH must consider defraying out-of-pocket expenses associated with unpaid internships which are part of the applicant's educational program as part of the stipend program. DOH must adopt minimum qualifications by rule for supervisors or facilities to provide clinical supervision services and maintain a list of entities interested in providing clinical supervision which meet minimum standards.

Waiver of Licensure Requirements. Disciplinary authorities under the UDA must waive education, training, experience and examination requirements for licensure for applicants who have been credentialed in another state with substantially equivalent standards for at least two years immediately preceding their application with no interruption in licensure lasting longer than 90 days. Disciplinary authorities may also waive these requirements for applicants who have achieved national certification for the profession as determined by the disciplinary authority in rule.

Review of Applications for Licensure of Temporary Practice Permits. Disciplinary authorities under the UDA may enter into contracts with persons or entities to review applications for licensure or temporary practice permits, provided that the disciplinary authority must make the final decision on the application.

Scheduling Licensure Exams. Applicants for licensure or certification as a social worker, mental health counselor, marriage and family therapist, or substance use disorder professional must be scheduled for the next examination following the filing of their application for licensure or certification.

Certified and Licensed Agency-Affiliated Counselors. An agency-affiliated counselor (AAC) may be certified or licensed in addition to being registered. A certified AAC must have a bachelor's degree, counseling-specific coursework as determined by DOH, and at least five years' experience in direct treatment of persons with mental disorders gained under the supervision of a licensed clinical supervisor. A certified AAC may provide assessment and diagnosis of mental disorders within the context of agency employment and under a licensed clinical supervisor, but may not serve as a designated crisis responder (DCR) or provide clinical supervision. A licensed AAC must have an advanced degree, counseling-specific coursework as determined by DOH, and at least two years' experience in direct treatment of persons with mental disorders gained under the supervision of a

licensed clinical supervisor. A licensed AAC may provide independent assessment and diagnosis of mental disorders and may serve as a DCR or clinical supervisor within the context of agency employment.

EFFECT OF HEALTH & LONG TERM CARE COMMITTEE AMENDMENT(S):

- Requires disciplinary authorities under the UDA to waive licensure requirements for some out-of-state license holders and allows them to waive requirements for individuals who hold a national certification.
- Allows disciplinary authorities to contract out review of applications for licensure or temporary practice.
- Requires applicants for behavioral health licensure or certification to be scheduled for the next available examination date after their application is filed.
- Establishes certification and licensure paths for AACs with an expanded scope of practice.

Appropriation: The bill contains a null and void clause requiring specific funding be provided in an omnibus appropriation act.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony on Second Substitute House Bill (Health & Long Term Care): *The committee recommended a different version of the bill than what was heard.* PRO: Not having enough behavioral health workers makes it difficult to implement new policy initiatives. We must recruit, educate, and retain the workforce. This bill focuses on education and licensing. We want to get workers who may come from other states into the workforce as quickly and safely as possible, by expanding where those with probationary licenses can practice, reducing hours, and creating a clearinghouse for associates who are trying to get access to supervisors. Crucially DOH will have to examine license requirements and make recommendations. This bill makes important strides towards addressing the acute workforce shortage in behavioral health. In DOH we acknowledge we have work to do. We appreciate the changes made to this bill in the House. We have a significant gap between the numbers graduating from masters programs and the people who actually enter the workforce. It is essential to create simplicity in the licensing process, and to address burnout. Inadequate pay is also important.

Persons Testifying (Health & Long Term Care): PRO: Representative Jessica Bateman, Prime Sponsor; Jeremy Arp, National Association of Social Workers - Washington Chapter; Dominique Avery, Washington Mental Health Counselors Association; Christie Spice, Washington State Department of Health.

Persons Signed In To Testify But Not Testifying (Health & Long Term Care): No one.

Staff Summary of Public Testimony on Bill as Amended by Health & Long Term Care (Ways & Means): CON: Mental health care is complex, and mental health practitioners are required to continue learning through their careers like doctors are. These amendments can be likened to a medical or dental assistant providing services in lieu of a doctor or dentist. Agency affiliated counselors can't be properly trained to do this work. After instructing masters-level students, bachelors-level education does not provide the same complexity and depth of instruction or experience. We can't solve the problem by promoting more unqualified professionals, and instead should support the ones already licensed.

OTHER: The amendments created in the Senate needs to be removed. The education and experience requirements should not have been changed because practitioners need to learn to treat and diagnose properly. Instead, you should look into reciprocity agreements, compacts, improving pay. Instead of decreasing the education required, we should make education more accessible. The barrier professionals face is pay, not the requirements for licensure. It's concerning that experience and education requirements would be reduced or removed.

Persons Testifying (Ways & Means): CON: Nykala Hill, Bridge Counseling PLLC; Meg Curtin Rey-Bear, LMHC.

OTHER: Bob Cooper, National Association of Social Workers WA Chapter; Jeremy Arp, National Association of Social Workers WA Chapter; Shannon Thompson LMHC, CMHS, NCC, Washington Mental Health Counselor Association; Letitia Johnson.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.