

SB696A: Behavior Analysis Regulatory Board

Background

- Behavior Analysis Regulatory Board (BARB) was created in the Health Licensing Office by the 2013 SB365, Autism Health Insurance Reform
 - Licenses behavior analysts and “registers” interventionists (paraprofessionals)
 - Provides “registration” for other licensed health care professionals whose scope of practice already includes Applied Behavior Analysis, like psychologists, SLPs, or OTs
- Challenges have arisen in implementation:
 - BARB legislation is a “one-off” that is very different from other boards in the Health Licensing Office, resulting in administrative inefficiencies
 - Conflicting authority with other boards that already include Applied Behavior Analysis as a therapeutic technique within their scope of practice
 - Current administrative rules would actually allow massage therapists, veterinarians or morticians to become “registered” to provide mental health services to children

Key Elements of Legislation

- Makes BARB more consistent with the Health Licensing Office’s framework for other boards
 - Streamlines operations and takes advantage of features available to other boards, like fingerprinting in criminal background checks
 - Establishes Title Act for use of the titles “Licensed Behavior Analyst” and “Licensed Assistant Behavior Analyst” in practicing ABA
- Resolves conflicting authority with other boards (psychology, speech-language pathology, etc.) by eliminating requirement for other licensed health care professionals to dual-register
 - Applied Behavior Analysis is already within the scope of practice of many other health care professions – which can continue to effectively regulate their licensees
- Continues to regulate a pool of qualified Behavior Analysis Interventionists for cost effective service delivery meeting the national standard of care
 - Interventionists will be registered directly by the Health Licensing Office
 - Supervised by a health care professional licensed by the BARB or other board
- Provide a path to licensure for existing, experienced ABA providers without BCBA or license
 - Existing unlicensed / uncertified ABA providers may continue practicing ABA and being reimbursed by insurance until 2018
 - BARB may establish a permanent licensing process by administrative rule
 - Grandfathering results in better network capacity through this transition
- Adds a consumer and another licensed health care professional to the BARB

Autism Society of Oregon

Shane Jackson, Lobbyist
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(503)577-7434

Autism Insurance for Oregon

Paul Terdal, Founder
paul@terdal.ORG
(503)984-2950

Illustration of Current / Proposed BARB Structure

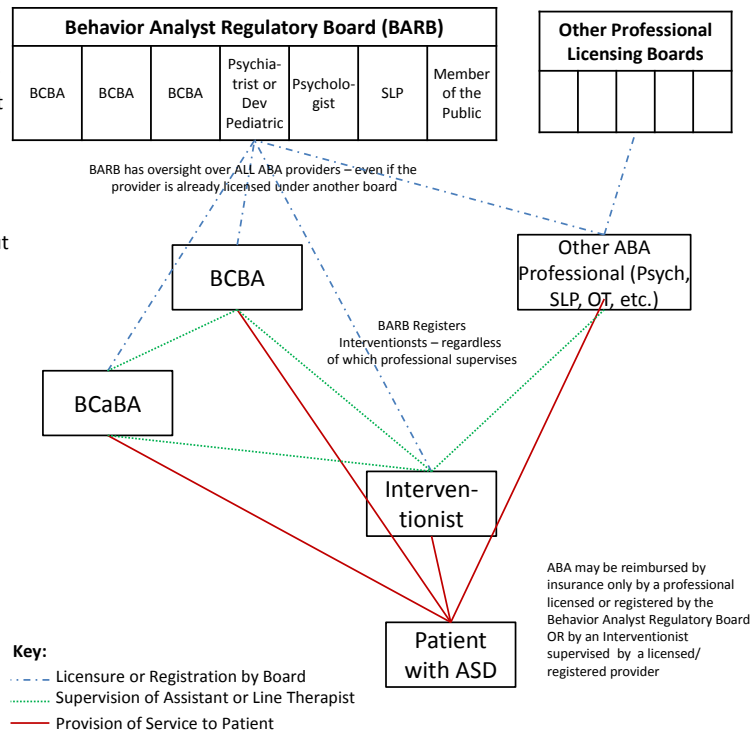
Current Structure: All ABA Providers must be licensed / registered by BARB, even if already licensed by another board

BARB provides dual-track licensing and registration for all ABA providers

- BCBA and BCaBAs certified by Behavior Analyst Certification Board, Inc. are granted licenses
- Other licensed healthcare professionals (Psych, SLP, OT, etc.) are registered by BARB
- Other existing ABA providers without BCBA or a health license may continue to practice ABA, but can't be reimbursed by insurance

BARB "Registers" Interventionists

- BARB develops rules for registration
- Interventionists may be supervised either by Licensed Behavior Analysts (BCBAs) or by other licensed health care professionals registered by the board



Proposed: BARB licenses BCBA / BCaBAs – other licensed health care professionals are regulated by other boards

BARB Licenses BCBA and grandfathered ABA providers

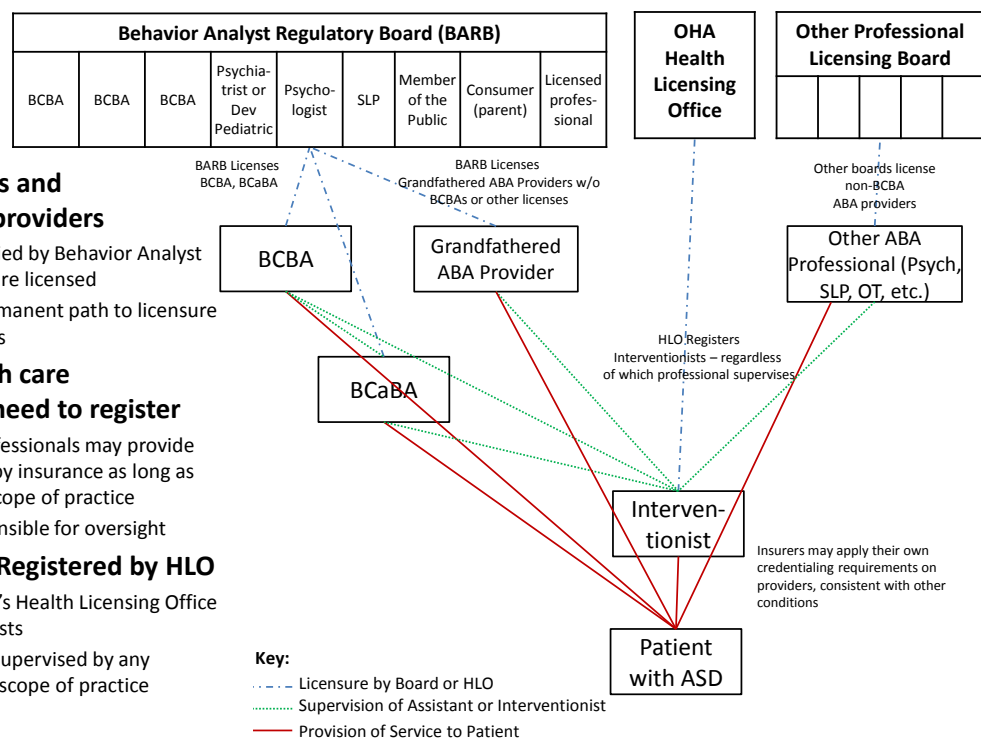
- BCBA and BCaBAs certified by Behavior Analyst Certification Board, Inc. are licensed
- BARB will establish a permanent path to licensure for existing ABA providers

Other licensed health care professionals don't need to register

- Licensed health care professionals may provide ABA and be reimbursed by insurance as long as ABA is in their licensed scope of practice
- Licensee's board is responsible for oversight

Interventionists are Registered by HLO

- Oregon Health Authority's Health Licensing Office registers all interventionists
- Interventionists may be supervised by any licensed provider whose scope of practice includes ABA



Letters of Support for SB696A

1. Paul Terdal (Consumer)
2. Brenna Legaard (Consumer)
3. Scott Fournier (Consumer)
4. Autism Society of Oregon (Advocacy Organization)
5. Oregon Pediatric Society (Professional Association)
6. Dr. Kathi Calouri (Provider)
7. Dr. Robert Nickel, OHSU (Provider)
8. Dr. Robert Buckendorf (Provider)
9. Trillium Family Services (Provider)

Note: this includes letters of support for SB696 with the -4 amendment – now engrossed as SB696A – that were originally prepared for the Senate Health Care committee, but not included in the legislative record.

Senate Committee on Healthcare
Paul Terdal, Portland, OR
Support Senate Bill 696A
May 19, 2015

Chairs Bates, Nathanson, and members of the Committee,

I'm writing in SUPPORT of SB696A, developed by Sen. Bates with input from an interdisciplinary group of providers, consumers, and insurers.

SB696A will resolve critical issues with the licensing and registration process for providers of Applied Behavior Analysis (ABA) services by:

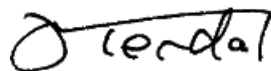
- Making the "Behavior Analysis Regulatory Board" (BARB) more consistent with the Health Licensing Office's framework for other boards
- Resolving conflicting authority with other boards (psychology, speech-language pathology, etc.) by eliminating requirement for other licensed health care professionals to dual-register

SB696 will also provide a regulated "grandfathering" process for existing ABA providers, who were practicing ABA in August, 2013 when Governor Kitzhaber first signed SB365. While insurance coverage – and licensure – of ABA providers is very new in Oregon, the practice of ABA has been here for many years. We have a small but dedicated group of existing ABA providers who have been serving Oregon families well for decades who have no licenses or certification in ABA – simply because it was never required or even available.

One example is Dr. Katherine Calouri, who earned her Ph.D. in Developmental Psychology at UCLA – where she served as the Clinic Supervisor for Dr. Ivar Lovaas' groundbreaking work on Applied Behavior Analysis therapy in the 1980s. She returned home to Oregon and founded Project PACE in 1992, and has provided critically necessary ABA therapy services for the autism community for more than 20 years. Dr. Calouri doesn't have a license in psychology, or a "BCBA" certificate – because it hasn't been required, and even the BCBA didn't exist when she began her work. The BACB, Inc. itself offered "grandfathering" to Dr. Calouri and other experienced providers after it was formed in 1999, but has since closed that opportunity.

SB696 will give Dr. Calouri and others like her a chance to continue their work on behalf of Oregon consumers through 2018 while working with the Board on a process for permanent licensure. All of these "grandfathered" providers will be required to register with the Health Licensing Office and provide a declaration of their experience during this grandfathering period.

Sincerely,



Paul Terdal

From: [Brenna Legaard](#)
To: [Sen.TimKnopp@state.or.us](#); [Sen.JeffKruse@state.or.us](#); [Sen.LaurieMonnesAnderson@state.or.us](#);
[Sen.ChipShields@state.or.us](#); [Sen.ElizabethSteinerHayward@state.or.us](#); [Sen.AlanBates@state.or.us](#);
[zena.rockowitz@state.or.us](#); [derek.sennes@state.or.us](#)
Cc: [Paul Terdal](#); "Shane Jackson"; [julie.mcfadden@state.or.us](#); [ASO - Exec Dir](#)
Subject: Senate Bill 696 with -4 Amendment
Date: Sunday, April 19, 2015 9:42:30 PM

Dear Chair Monnes Anderson and members of the Senate Committee on Healthcare;

My son has autism, and currently receives ABA therapy, which has been tremendously helpful. I have been involved in the work group which has advised Senator Bates regarding SB 696, and ask you to support it with the -4 amendment.

This bill was developed by Sen. Bates with input from a broad group of providers, consumers, and insurers. It will resolve critical issues with the licensing and registration process for providers of Applied Behavior Analysis ("ABA") services by harmonizing the Behavior Analysis Regulatory Board ("BARB") with the Health Licensing Office's framework for other boards and by resolving conflict between the BARB and other boards such as psychology, speech-language pathology, etc.

It establishes an interdisciplinary BARB, and I understand that members of ORABA and the BACB have concerns with that aspect of the bill. ORABA is made up of holders of the BCBA credential, and the BACB is a national nonprofit that provides that credential. ORABA's BACB members are exceptional therapists. My son sees one, and she is both incredibly gifted and incredibly dedicated. However, because one purpose of the BARB is to license BACBs in Oregon, ORABA's members tend to see it as "their" board, over which they should have control. However, in Oregon ABA is a developing field, and because insurance coverage for therapy for individuals with autism and other neurodevelopmental disorders has only very recently become available, the number of ABA practitioners in Oregon, BACBs or otherwise, is growing but still small. While one purpose of the BARB is to provide a licensing body for BCBA's, that purpose is part and parcel of the central purpose of the BARB, which is to license qualified practitioners of ABA who are not already licensed by an existing board (such as speech-language pathology, psychology, etc). Some exceptionally well qualified practitioners of ABA in this state are not currently licensed by any board and do not hold BCBA's. The BARB must develop rules for licensure of professionals who do not hold BCBA's in order to ensure that individuals in immediate, urgent need for ABA have the best chance of access to high quality professionals.

Nothing in AB 696 will "force" the BARB or its BCBA members to license anyone who is not qualified to practice. Nothing in it will undermine the BCBA credential or force any BCBA in good standing out of practice. ORABA members' fears that these things may occur could be dispelled by a fair reading of the bill.

Like others in Oregon's autism community, I look forward to a collaborate process which is inclusive of all professions which encompass behavior therapy for individuals with autism, as I believe that this sort of collaborative, inclusive process will best serve the needs of individuals with autism, their families, and their communities. I believe that SB 696 is the best way to foster such a process, and I hope you will join me in supporting this bill.

Thank you,

Brenna Legaard
(503) 490-6902

From: [Scott Fournier](#)
To: Sen.TimKnopp@state.or.us; Sen.JeffKruse@state.or.us; Sen.LaurieMonnesAnderson@state.or.us;
Sen.ChipShields@state.or.us; Sen.ElizabethSteinerHayward@state.or.us; Sen.AlanBates@state.or.us
Subject: Please support SB696
Date: Wednesday, April 15, 2015 4:40:39 PM

Dear members of the Senate Health Care committee,

My son has Autism Spectrum Disorder and he and our family have benefited tremendously from access to applied behavioral analysis therapy. This treatment has come at great economic and professional cost to our family. Unfortunately, other children may not benefit from ABA because of a scarcity of providers in Oregon. SB365 was created to help families access ABA quickly (thank you Sen. Bates), but it is ineffective so long as the supply of therapists and para-professionals continues to be limited. One of the ways that supply is restricted is with a very rigid interpretation of ABA such as the one promulgated by the Behavioral Analysis Certification Board. Its definition of ABA is significantly more restrictive than how SB365 defines ABA. This wouldn't matter, except that as it stands, the certifying body under SB365, the Behavioral Analysis Regulatory Board (BARB), is effectively controlled by the BACB. Although the advocacy community has tried to work with the BARB to permit certain professionals to continue their existing ABA practices, the BARB has been unwilling to accommodate this need and this lack of compromise is will put Oregon children at risk of losing their providers because they cannot conform to the BACB's requirements without a significant investment in time (and cost, including opportunity cost while they pursue credentialing). SB696 will help solve this problem in the following ways:

- Resolve conflicting authority with other licensing boards (such as psychology, speech-language pathology, and occupational therapy)
- Make the Behavior Analysis Regulatory Board legislation more consistent with the Health Licensing Office's framework for other boards to streamline operations
- Provide a path to licensure for existing, experienced ABA providers -- resulting in better network capacity through this transition
- Clarify that the Board's responsibility is focused on Applied Behavior Analysis providers – eliminating inadvertent roadblocks to coverage of other forms of treatment for autism

These fixes are critical to ensure that patients receive access to ABA, which Oregon's Health Evidence Review Commission, U.S. Agency for Healthcare Research and Quality, U.S. Surgeon General and many others have found to be among the most effective treatments for autism.

I urge you to support this bill.

Sincerely,

Scott Fournier

4370 SW Bertha Avenue

Portland, OR 97239
(503) 427-8259

From: [ASO - Exec Dir](#)
To: Sen.TimKnopp@state.or.us; Sen.JeffKruse@state.or.us; Sen.LaurieMonnesAnderson@state.or.us;
Sen.ChipShields@state.or.us; Sen.ElizabethSteinerHayward@state.or.us; Sen.AlanBates@state.or.us;
zena.rockowitz@state.or.us; derek.sennes@state.or.us
Cc: [Paul Terdal](mailto:Paul.Terdal); [Shane Jackson](mailto:Shane.Jackson); julie.mcfadden@state.or.us; [Brenna Legaard](mailto:Brenna.Legaard)
Subject: In Support of SB696 with -4 Amendment
Date: Monday, April 20, 2015 2:03:19 AM

Chair Monnes Anderson and members of the Committee,

On behalf of the Autism Society of Oregon (ASO), I am writing in SUPPORT of SB696 with the -4 Amendment. I am pleased to be joined by the Oregon Pediatric Society, Center for Autism and Related Disorders, Autism Research Group, Autism Insurance for Oregon, and many others in supporting SB696.

As a parent of two children on the autism spectrum and consumer of Applied Behavior Analysis (ABA) services, I am also writing to express my personal support of SB696 with the -4 Amendment.

SB696 was developed by Sen. Bates with input from an interdisciplinary group of providers, consumers and insurers, including ASO. SB696 resolves critical issues with the licensing and registration process for providers of ABA services by harmonizing the Behavior Analysis Regulatory Board (BARB) with the Health Licensing Office's framework for other boards and by resolving conflict between the BARB and other boards regulating licensed health care professionals who also offer ABA services within the scope of their licensing.

SB696 also expands and diversifies the Board membership by adding a Consumer and another Licensed Health Care professional (such as a psychologist or speech-language pathologist) whose scope of practice includes ABA therapy. It is important to have a consumer of ABA services directly involved in the BARB, as we are directly impacted by their decisions. While ASO supports the desire of the Oregon Association of Behavior Analysis (ORABA) for eventual self-regulation with a majority of licensed behavior analysts, we agree with the decision by Sen. Bates and the workgroup to proceed for now with a more diverse board with broader oversight by other health care professionals. It is reasonable and appropriate to provide diverse and experienced medical oversight over licensing of behavior analysts as the field is very new throughout the United States. This as an issue that can be revisited as the BARB stabilizes its operations and the field of behavior analysis grows.

The Autism Society of Oregon supports the "grandfathering" process in SB696 for ABA providers who were practicing ABA as of August, 2013, when SB365 was signed into law. A small number of highly qualified ABA providers have served Oregon families well for many years, but are not Board Certified Behavior Analysts (BCBA), generally because they completed their training and started practicing before the BCBA became available.

It is vitally important for consumers that we continue to have access to these highly qualified, experienced providers of ABA therapy while permanent licensing provisions are being determined. Over 9,000 children in Oregon are identified as having an autism spectrum disorder. Currently there are less than 50 BCBA's in the state. While not all children require ABA therapy, there are clearly not nearly enough practitioners to serve the population who would benefit from ABA therapy. As a parent and consumer of

ABA services, I see no discrepancy between protecting consumers and providing access to highly qualified, well trained and experienced ABA providers who do not have the BCBA certification or another health license, through "grandfathering" while permanent licensing requirements are being determined. There would be far more harm to consumers if these providers are not permitted to continue to provide these vitally important and necessary services.

We appreciate Sen. Bates' long-term commitment to the autism community and the collaborative process he has initiated to develop SB696 with the -4 Amendment. This bill will best serve the needs of individuals with autism in accessing high quality ABA services. I hope you will support SB696.

Very truly yours,

Tobi Rates

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Tobi Rates

Executive Director,

Autism Society of Oregon

PO Box 69635

Portland, OR 97239

Phone: 503-636-1676 (Portland area) or 1-888-AUTISM-1 (toll-free)

E-mail: Info@AutismSocietyOregon.org

PLEASE NOTE THAT OUR ADDRESS HAS CHANGED.

April is Autism Awareness Month:

Coming April 11th - [Color the Coast for Autism! in Astoria](#)

Coming April 19th - [13th Annual Autism Walk in Portland](#)

Coming May 2nd - [2nd Annual Autism Walk in Central Oregon](#)

Please consider making a tax-deductible donation today

at www.AutismSocietyOregon.org. (Federal Tax ID #: 93-0771249). All of the funds we raise stay in Oregon to fund our work here. Thank you!

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April 17, 2015

Honorable Sen Monnes Anderson and Members of the Health Care Committee:

Oregon Pediatric Society writes in support of SB 696, which makes critical fixes to current legislation regarding the Applied Behavioral Analysis (ABA) Regulatory Board. We are excited about the expanded access to ABA that is now available to children in Oregon on the autism spectrum. However, to make sure that this care is truly accessible, we understand that some changes to the current law may be necessary.

Specifically, SB 696 will make it easier for existing providers to be licensed for and to provide ABA therapy, if it is already within their scope of practice. Also it will make the Behavioral Analysis Regulatory Board more similar to the Health Licensing Office's framework for other boards in terms of things like fingerprinting and criminal background checks.

We believe that these are common-sense changes that will improve care and also make ABA care in Oregon more cost-effective. We see no reason why any health care provider or educational service provider would be opposed to such changes.

Thank you very much for your consideration of this legislation.

Sincerely,

Katharine Zuckerman, MD MPH FAAP
Co-Chair, Legislative Committee
Oregon Pediatric Society



Monday, April 20, 2015

RE: Support of Senate Bill 696

To Chair Monnes Anderson and members of the Senate Committee on Healthcare:

I am writing in SUPPORT of SB696.

My entire professional life has been spent working with children with ASD and their families. I opened my private practice in Oregon in 1992 after 10 years of experience. At that time, certification for Applied Behavioral Analysis (ABA) did not exist and Oregon did not require licensure for the services I provided.

In the subsequent 23 years, my staff and I have been providing top-quality treatment based on the principles of ABA. SB696 will provide a "grandfathering" process whereby experienced providers like myself can demonstrate our extensive expertise and qualifications.

Most of the families I serve pay with private funds, creating a significant financial burden to families already in crisis as a result of the diagnosis. SB696 will allow more families to access critical ABA treatment services, leading to a higher quality of life for all members of the family. Without this bill, only the most affluent families can access the experienced, compassionate, high quality treatment services provided by my program.

Thank you for your support of SB696.

Sincerely,
Kathi Calouri, Ph.D.
Developmental Psychologist

From: [Robert Nickel](#)
To: Sen.TimKnopp@state.or.us; Sen.JeffKruse@state.or.us; Sen.LaurieMonnesAnderson@state.or.us;
Sen.ChipShields@state.or.us; Sen.ElizabethSteinerHayward@state.or.us; Sen.AlanBates@state.or.us
Cc: [Robert Nickel](#); [Paul Terdal](#)
Subject: SB696 -fix critical issue with the BARB
Date: Saturday, April 18, 2015 9:04:28 AM

Dear Senate Health Care committee members:

I'm writing in support of SB696 which will correct issues that have arisen with implementation of the Behavior Analysis Regulatory Board or BARB. It will greatly streamline the licensing of providers of Applied Behavior Analysis (ABA) based behavioral therapies. ABA based behavioral therapies are critical treatments for many children with autism spectrum disorders (ASD). In short, SB696 will:

- Resolve conflicting authority with other licensing boards (such as psychology, speech-language pathology, and occupational therapy)
- Make the Behavior Analysis Regulatory Board legislation more consistent with the Health Licensing Office's framework for other boards
- Provide a path to licensure for existing, experienced ABA providers -- resulting in better network capacity through this transition
- Clarify that the Board's responsibility is focused on Applied Behavior Analysis based therapy providers which will eliminate inadvertent roadblocks to coverage of other forms of treatment for autism

These fixes are critical to ensure that children with ASD have access to Applied Behavior Analysis based behavioral therapies when needed. ABA based behavioral therapies are evidence-based treatments for children with ASD. Oregon's Health Evidence Review Commission, U.S. Agency for Healthcare Research and Quality, U.S. Surgeon General and many others have endorsed ABA therapies as evidence-based treatments for children with autism.

Sincerely,

Robert Nickel MD
Developmental Pediatrician
Professor of Pediatrics
Oregon Health & Science University



One Lincoln Center, Suite 410 10300 SW Greenburg Rd Tigard, OR 97223 phone 503-517-8555 Fax 503-517-8556

To:

Sen.TimKnopp@state.or.us

Sen.JeffKruse@state.or.us

Sen.LaurieMonnesAnderson@state.or.us

Sen.ChipShields@state.or.us

Sen.ElizabethSteinerHayward@state.or.us

Sen.AlanBates@state.or.us

Subject:

Please Support SB696 – to fix critical issues with the Behavior Analysis Regulatory Board

Dear members of the Senate Health Care committee,

I'm writing in support of SB696, which will greatly streamline the licensing of providers of Applied Behavior Analysis (ABA) therapy, a leading treatment for autism. SB696 will:

- Resolve conflicting authority with other licensing boards (such as psychology, speech-language pathology, and occupational therapy)
- Make the Behavior Analysis Regulatory Board legislation more consistent with the Health Licensing Office's framework for other boards to streamline operations
- Provide a path to licensure for existing, experienced ABA providers -- resulting in better network capacity through this transition
- Clarify that the Board's responsibility is focused on Applied Behavior Analysis providers – eliminating inadvertent roadblocks to coverage of other forms of treatment for autism

I have been a provider, as a speech language pathologist, to children with autism for almost 40 years. Our treatments are effective, measurable, and consistent with general behavioral principles. These fixes I am supporting are critical to ensure that patients receive access to Applied Behavior Analysis therapy – which Oregon's Health Evidence Review Commission, U.S. Agency for Healthcare Research and Quality, U.S. Surgeon General and many others have found to be among the most effective treatments for autism.

Sincerely,

A handwritten signature in black ink that reads 'G. Robert Buckendorf PhD'.

G. Robert Buckendorf, PhD
Speech-Language Pathologist, CCC



Trillium
FAMILY SERVICESSM

Building Brighter Futures with Children and Families

April 17, 2015

Subject: Please Support SB696 – to fix critical issues with the Behavior Analysis Regulatory Board

Dear members of the Senate Health Care committee,

I am the VP of Business Development for Trillium Family Services. Trillium has recently begun to provide ABA services for children who are on the autism spectrum. We have learned that there is a significant shortage of licensed professionals to do the work to serve this deserving and needy population so it is imperative that Oregon is able to develop and maintain an adequate supply of these trained professionals to do this important work. Accordingly there are some barriers or hurdles in place that inhibit our ability to provide and develop an adequate supply of these skilled clinicians.

Therefore, I'm writing in support of SB696, which will greatly streamline the licensing of providers of Applied Behavior Analysis (ABA) therapy, a leading treatment for autism. SB696 will:

- Resolve conflicting authority with other licensing boards (such as psychology, speech-language pathology, and occupational therapy)
- Make the Behavior Analysis Regulatory Board legislation more consistent with the Health Licensing Office's framework for other boards to streamline operations
- Provide a path to licensure for existing, experienced ABA providers -- resulting in better network capacity through this transition
- Clarify that the Board's responsibility is focused on Applied Behavior Analysis providers – eliminating inadvertent roadblocks to coverage of other forms of treatment for autism

These changes are critical to ensure that patients receive access to Applied Behavior Analysis therapy – which Oregon's Health Evidence Review Commission, U.S. Agency for Healthcare Research and Quality, U.S. Surgeon General and many others have found to be among the most effective treatments for autism.

Sincerely,

Rich Blum
VP Business Development & Provider Relations
Trillium Family Services

www.trilliumfamily.org



• **Portland Metro Region**

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• **Mid-Willamette Valley Region**

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