

HOUSE AMENDMENTS TO HOUSE BILL 4071

By COMMITTEE ON BEHAVIORAL HEALTH AND HEALTH CARE

February 22

1 On page 1 of the printed bill, delete lines 4 through 27 and delete page 2 and insert:

2 **“SECTION 1. (1) The Task Force on Health Professional Licensing Modernization is es-**
3 **tablished.**

4 **“(2) The task force consists of 20 members appointed as follows:**

5 **“(a) The President of the Senate shall appoint two members from among members of the**
6 **Senate.**

7 **“(b) The Speaker of the House of Representatives shall appoint two members from among**
8 **the members of the House of Representatives.**

9 **“(c) The Governor shall appoint 16 members as follows:**

10 **“(A) A representative of the Oregon Medical Board;**

11 **“(B) A representative of the State Board of Licensed Social Workers;**

12 **“(C) A representative of the Oregon Board of Dentistry;**

13 **“(D) A representative of the Oregon Board of Physical Therapy;**

14 **“(E) A representative of the Oregon State Board of Nursing;**

15 **“(F) A representative of physicians licensed under ORS chapter 677;**

16 **“(G) A representative of clinical social workers licensed under ORS 675.530;**

17 **“(H) A representative of dentists licensed under ORS chapter 679;**

18 **“(I) A representative of nurses licensed under ORS chapter 678;**

19 **“(J) Five representatives of employers of the health professionals described in subpara-**
20 **graphs (F) to (I) and (L) of this paragraph, at least two of whom represent counties, two of**
21 **whom represent clinic systems and one of whom represents a hospital system;**

22 **“(K) A licensed marriage and family therapist or a licensed professional counselor, as**
23 **defined in ORS 675.705; and**

24 **“(L) A representative from the Oregon Board of Licensed Professional Counselors and**
25 **Therapists.**

26 **“(3) The task force shall:**

27 **“(a) Review the mission and vision statements of the health professional regulatory**
28 **boards described in subsection (2) of this section;**

29 **“(b) Recommend key performance metrics for health professional licensing processes for**
30 **each board;**

31 **“(c) Recommend resources and timelines needed for the health professional regulatory**
32 **boards to develop actionable plans to meet their key performance metrics with a focus on**
33 **what is needed to deliver health professional licenses accurately, in a timely manner and**
34 **with high applicant satisfaction;**

35 **“(d) Identify roadblocks to success, including applicant-facing processes, internal pro-**

1 cesses and technical infrastructure;

2 “(e) Review what changes in health professional regulatory board processes have been
3 successful in shortening application timelines and can be replicated;

4 “(f) Review the health professional regulatory boards’ technical infrastructure or other
5 resources that have been successful in improving functions;

6 “(g) Identify best practices from other states’ efforts to improve licensing processes;

7 “(h) Explore barriers to and recommend solutions for prompt licensing of health profes-
8 sionals who move to Oregon from other states and of new graduates;

9 “(i) Recommend processes by which health professionals trained outside of Oregon may
10 achieve licensure within an appropriate timeframe; and

11 “(j) Recommend best practices for the health professional regulatory boards when inter-
12 acting with applicants.

13 “(4) The task force may request that health professional regulatory boards, including but
14 not limited to those described in subsection (2) of this section, and the Health Licensing Of-
15 fice provide information to the task force.

16 “(5) A majority of the voting members of the task force constitutes a quorum for the
17 transaction of business.

18 “(6) Official action by the task force requires the approval of a majority of the voting
19 members of the task force.

20 “(7) The task force shall elect one of its members to serve as chairperson.

21 “(8) If there is a vacancy for any cause, the appointing authority shall make an appoint-
22 ment to become immediately effective.

23 “(9) The task force shall meet monthly from April 2024 through December 2025 and may
24 hold additional meetings at times and places specified by the call of the chairperson or of a
25 majority of the voting members of the task force.

26 “(10) The task force may adopt rules necessary for the operation of the task force.

27 “(11) The task force shall submit three reports in the manner provided by ORS 192.245,
28 and include recommendations for legislation, to the interim committees of the Legislative
29 Assembly related to health. The task force shall submit the reports on or before:

30 “(a) September 15, 2024;

31 “(b) September 15, 2025; and

32 “(c) December 15, 2025.

33 “(12) The Legislative Policy and Research Director shall provide staff support to the task
34 force.

35 “(13) Members of the Legislative Assembly appointed to the task force are nonvoting
36 members of the task force and may act in an advisory capacity only.

37 “(14) Members of the task force who are not members of the Legislative Assembly are
38 not entitled to compensation or reimbursement for expenses and serve as volunteers on the
39 task force.

40 “(15) All agencies of state government, as defined in ORS 174.111, are directed to assist
41 the task force in the performance of the duties of the task force and, to the extent permitted
42 by laws relating to confidentiality, to furnish information and advice the members of the task
43 force consider necessary to perform their duties.

44 “SECTION 2. Section 1 of this 2024 Act is repealed on December 31, 2025.

45 “SECTION 3. This 2024 Act takes effect on the 91st day after the date on which the 2024

1 **regular session of the Eighty-second Legislative Assembly adjourns sine die.”**
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