



Reducing Barriers for Behavioral Health Workers (LC 216)

Background

Oregon faces a behavioral health workforce crisis. Waitlists for mental health services have grown by months since the pandemic. More than 75% of addiction counselors, medical doctors, and psychiatrists report intent to quit due to overwhelming caseloads, administrative burden, and insufficient support.¹ When professionals leave, Oregonians in crisis go without care.

Governor Kotek established the Behavioral Health Talent Council to address this crisis. Working with frontline providers, licensing authorities, and experts across the state, the Council developed a comprehensive set of recommendations for improving training and education pathways into the workforce, streamlining licensing and credentialing, and improving recruitment and retention for providers.

This bill implements four critical legislative actions the Council identified:

Streamline Credentialing for Behavioral Health Workers

Currently, workers are required to be credentialed through the Oregon Health Authority (OHA), as well as separately through each entity that their provider bills for their services. This causes unnecessary delays that keep qualified professionals from serving patients who are waiting for care and requires providers to pay workers who are not yet able to provide care.

This bill will require OHA to adopt a centralized credentialing process for behavioral health workers, allowing qualified workers to begin providing care sooner and reducing administrative burden on providers.

Reduce Administrative Burden to Give Workers More Time to Care for Patients

Behavioral health workers report that increasing administrative requirements – including duplicative reporting – take time away from patient care and contribute to burnout.

This bill directs OHA to eliminate unnecessary administrative burden as part of their mission, and report to the Legislature and Governor every two years on steps they have taken to reduce administrative burdens on providers.

Expand Licensing Boards' Ability to Serve Licensees and Protect Consumers

¹ [Oregon Behavioral Health Talent Assessment](#)

The Mental Health Regulatory Agency (MHRA) was created in 2017 to coordinate the administrative and regulatory functions of the Board of Psychologists (BOP) and the Board of Licensed Professional Counselors and Therapists (LPCT). The Board of Licensed Social Workers (BLSW) was not included in this structure and stands alone, despite significant overlap in their duties.

This bill brings the BLSW under the MHRA to improve efficiency and customer service without raising costs. This structure will leverage current administrative capacity to provide enhanced structure, customer support, and accountability to better serve licensees and clients of all three agencies.

Implement Cross-License Supervision to Expand Access to Clinical Supervision

Prospective master's level licensees need supervised hours to attain their license, but a lack of qualified clinical supervisors has created a bottleneck. Current rules for some behavioral health licensees allow for supervision by "any qualified mental health professional," while others are more restrictive.

This bill directs the licensing boards to draft and implement rules allowing for any prospective master's level qualified mental health licensee to receive supervision from any qualified mental health licensed professional, regardless of whether they and their supervisor possess the same type of license. This will reduce barriers for qualified workers obtaining their license.

For more information, contact:

Bob Livingston

Legislative Director

bob.livingston@oregon.gov

971-208-0894

Danny Moran

Deputy Legislative Director

danny.moran@oregon.gov

503-551-8636