



HB 4083: Cutting Red Tape for Behavioral Health Workers

Background

Oregon faces a behavioral health workforce crisis. The HECC surveyed 14 behavioral health profession types and found that 9 have alarmingly high turnover risk - more than two-thirds of workers intend to quit.¹ When professionals leave, Oregonians in crisis go without care.

Last May, Governor Kotek established the Behavioral Health Talent Council to address this crisis. The council is chaired by First Lady Aimee Kotek Wilson, a former social worker. 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 strengthening recruitment and retention for providers.

House Bill 4083 implements three critical legislative actions the Council identified:

Streamline Credentialing for Behavioral Health Workers

Currently, workers are required to be validated through the Oregon Health Authority (OHA) to bill Medicaid and then credentialed and reported on separately through different entities including each payer 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.

HB 4083 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.

HB 4083 directs OHA to minimize 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.

¹ [Oregon Behavioral Health Talent Assessment](#)

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.

HB 4083 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.

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