

**FISCAL NOTE**  
**Requested by Legislative Council**  
**01/22/2015**

Amendment to: HB 1048

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2013-2015 Biennium		2015-2017 Biennium		2017-2019 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures						
Appropriations						

- 1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2013-2015 Biennium	2015-2017 Biennium	2017-2019 Biennium
Counties			
Cities			
School Districts			
Townships			

- 2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

The engrossed bill provides for six separate behavioral health licensure boards (as outlined in section 2B) to each develop a plan, in collaboration with the other boards, for the administration and implementation of licensing and reciprocity standards for licensees.

- B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

The engrossed bill no longer requires the Department of Health to develop a plan, during the 2015-16 interim, for the administration and implementation of uniform licensing and reciprocity standards for licensees of the board of addiction counseling examiners, board of counseling examiners, ND board of social work examiners, state board of psychologist examiners, state board of medical examiners, and the ND marriage and family therapy license board. Therefore, this bill has no fiscal impact on the Department of Health.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

- A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

- B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

- C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

**Name:** Brenda M. Weisz

**Agency:** Department of Health

**Telephone:** 328-4542

**Date Prepared:** 01/22/2015

**FISCAL NOTE**  
**Requested by Legislative Council**  
**12/19/2014**

Bill/Resolution No.: HB 1048

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2013-2015 Biennium		2015-2017 Biennium		2017-2019 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures			\$108,900			
Appropriations			\$108,900			

- 1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2013-2015 Biennium	2015-2017 Biennium	2017-2019 Biennium
Counties			
Cities			
School Districts			
Townships			

- 2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This Bill relates to the Department of Health (DoH) oversight and administration of the development of uniform licensing and reciprocity standards for licensees of six state boards of examiners for multiple disciplines as defined in section 2B below.

- B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

Section 1 requires the DoH to develop a plan, during the 2015-16 interim, for the administration and implementation of uniform licensing and reciprocity standards for licensees of the board of addiction counseling examiners, board of counseling examiners, ND board of social work examiners, state board of psychologist examiners, state board of medical examiners, and the ND marriage and family therapy license board.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

- A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

- B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

The DoH would need to contract with an outside vendor to complete the evaluation and study of 6 program standards as required by this Bill at an estimated cost of \$80,000. This expenditure would be included in the operating line item. In addition, an individual of the Department would be required to develop the RFP, oversee the contract and the study at approximately 20% of the individual's time for the first year of the biennium at an estimated cost of \$28,900. This expenditure would be included in the salary line item.  
 Total estimated cost of this Bill - \$108,900.

- C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

Funding for this effort is not included the Department's appropriation bill (HB 1004.)

**Name:** Brenda M. Weisz

**Agency:** Department of Health

**Telephone:** 328-4542

**Date Prepared:** 01/05/2015

**2015 HOUSE HUMAN SERVICES**

**HB 1048**

# 2015 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee  
Fort Union Room, State Capitol

1048  
1/14/2015  
21965

- Subcommittee  
 Conference Committee

Amanda Muscha

## Explanation or reason for introduction of bill/resolution:

Relating to state department of health oversight and administration of the development of uniform licensing and reciprocity standards for licensees of the board of addiction counseling examiners.

## Minutes:

Pete Silbernagel: Testimony #1  
Duane Houdek: Testimony #2  
Rev. Larry J. Giese: Testimony #3

**Chairman Weize:** Called the meeting to order

**Representative Damschen:** In our interim committee there is a real shortage of addiction counselors and getting licenses seems difficult and time consuming. The reciprocity issue came up and this bill would establish an oversight system and reciprocity language for behavioral health licensing boards. It also puts a 30 day time period for the license to be issued after the application is filed. I will let the experts explain the details.

**Allan Knudsu:** I am with the legislative council to provide information on the bill. I am standing in for Alex Cronstwits. Representative provided quite a bit of information before me. We hired a consultant and there was also behavioral health stake holders group that provided information. There was some concern about addiction counselors and the delay in becoming licensed and North Dakota accepting licenses from other states. From the recommendation came forward from the Behavioral Health Stake Holders Group that maybe all of the occupational licensing boards that deal with addictions and counseling etc. should have uniform standards that they follow to license people. To provide that one occupation isn't treated differently than another. That is the reason for this and the committee felt that the health department would be the organization to put together these standards and working with the boards. The bill requires the alpha council to develop a plan for uniform standards and to work with the licensing boards and on page to it requires that all of those boards participate and cooperate with the department of health as they are establishing those standards. The report of the committee is in the legislative management reports that you have all been given. On pages 255 is the start of the discussion and specifically on page 261 it talks about the recommendation that came forward.

**Chairman Weize:** So in sections 2-7 that is strictly putting the language in each board practice act and code.

**Representative Silbernagel:** (See Testimony #1)

**Representative Becker:** So the overall intent makes a whole lot of common sense. Down the road, if not immediately, if the bill is passed, is there any reduction in cost over the years by combining things instead of having separate licensure? Will there be any cost savings?

**Representative Silbernagel:** I am not an expert but I will give you an example. Certain licensure boards require a face to face. With today's technology you can do a pretty good interview over the web. That would be a savings to the person applying to the job and to the agency doing the interview. I would hope that as you look for efficiency in the process there would be cost savings but as a study group we didn't have time to look at that.

**Representative Fehr:** I understand that this is to develop a plan, and I don't know a lot about all of the boards but I do know quite a bit about the psychology boards and one of the things they require is that if somebody is either a resident or move to the state they try to get somebody to fill out an application as soon as possible. If they are a resident meaning they are not licensed any place, they require they to fill out a license and they will have to take a national exam and that is pretty uniform across the country. They want to review the license before approving them to take the national exam. Which that means is if they have 30 days to issue a license, they are not going to ask them to fill out a license until after the residency which would in fact slow down the process. Right now is if they take the application then they are allowed to take the exam which they can take any amount of time. If we went with something that is 30 days it would take that whole process and turn it upside down and I'm not sure how that would go.

**Representative Silbernagel:** You just exemplified the complexity of one licensure process. Multiply that by each licensure process and to the extent that we can bring continuity or consistency to make easier (there are exceptions and differences). The 30 days we began with was a starting point and it will have to be looked at.

**Representative Fehr:** Right now the plan has to do with the department of health and their council. To what extent would they have an ongoing involvement and to what extent would that remove the authority of this agency.

**Representative Silbernagel:** That would be part of the planning process and to be developed within the plan to make those recommendations and again before the plan would be adopted it would be brought back to the legislative body for the final approval, but this basically engages that group to do the research, make recommendations, and develop a plan on how that should work.

**Chairman Weize:** When you were discussing this you had a pretty diverse group of members, from medical examiners to marriage and family. It seems like there are maybe

not a lot of similarities? Did you look at that, that these boards were similar enough to see if this would work?

**Representative Silbernagel:** I can only share what came from the stake holders group and what the consultant of my personal opinion is. Recognizing the differences within the licensure, this is an effort that needs to be undertaken and try to differentiate which ones need to be unique and which ones can be the same. There are opportunities to expand the work force by mediating some of the concerns and some might be simple or complicated, and the time we had (we had a 42000 grant to do the study) you can't do much with that.

**Senator Sinner:** I just want to speak of an example that came to me. Recently I was contacted by my niece who graduated from the Minnesota College counseling program in 2014 is going for the qualification process in Minnesota, subsequently offered a job in North Dakota, she would like to move here. She has been told by the board of counselor examiners that she has to start that process all over again even though she has almost 8 months into that already. Now she has to go another two years. That why I think this study is necessary. We can look at the differences between other states and see if we can come to some agreement. I will not get done overnight but it will solve problems.

**Representative Fehr:** When you said start the process over again, are you referring to the licensure or training process?

**Senator Sinner:** Yes the training process to become licensed. In North Dakota you get an interim license, and you stay on that license for two years and you have to have one hour of supervision for 2 years a total of 100 hours. Minnesota doesn't have an interim licensure program or phase. They just go through the interim, get the required hours, and then after they have done so much they are qualified for licensing. In North Dakota, you have to have the beginning license, if you do not you are not qualified. So she could go through all of her qualifications in Minnesota and once she gets her license over there she can bring it over here. If she is being trained and she is going through that process she has to start over if she comes to North Dakota.

**Representative Fehr:** Is she currently license in Minnesota an asking for reciprocity?

**Senator Sinner:** No she is not. What she asked me to do is to see if there was a way for North Dakota will also certain credit for those other hours of training she already has. She has over 100 hours but we require 100 in two years with this interim license. She come here she has to start all over again. So she is going to stay in Minnesota until she gets her license then come get a job here.

**Representative Fehr:** So she has a degree already and her training after her degree, they're saying she would have to start those over if she came here?

Senator Sinner: Yes

**Duane Houdek:** (See Testimony #2)... Something that makes us different is that we get applicants from all over the world and as much as half might have graduated from a foreign school. Giving those people licenses right away may not be the best practice... It would be reckless to put speed over requirements.

**Chairman Weize:** The language that requires you to participate. Are you okay with that?

**Duane Houdek:** We do a great job and ours is so unique but we have no problem to do it for the common good. We have no interest in opposing.

**Representative Fehr:** Going back to the 30 day application. Could you in terms of the board you represent. What goes into the application when you have one completed? When would those 30 days actually start?

**Duane Houdek:** We look at a number of things. There is a national licensure test for physicians it is the USMLE and we have very detailed rules about how long they make take to pass that and how many attempts. We look at their past employment, about actually talking to the people they worked for. Even people they may not place on their resume. We look at the criminal background check, the medical education. We have certain schools we do not accept. Finally we look at their post graduate training; they will have to have done some form of residency. We get their residency report also. We can do our part in 30 days with our staff of two people that work on it. The hard part is getting references talking to us and that is not completely in our control.

**Representative Fehr:** I guess the one thing I'm wondering is, if someone fills out an application and you get it but you do not yet have the residency report yet or you haven't gotten transcripts that you're waiting on. When does the 30 day start? Is it when the application is handed into you or when all the documents have come to you?

**Duane Houdek:** We can't process an application until we have the supporting documentation because it is part of the request. There are certain things that do not change. We will rely on that some other board got that document and we do away with that stuff. Where we do not just refer to other boards is that look at the employment and the current look. Reciprocity sounds great. If they already went through the process why not go through it here, but there are real complicated issues with that. In a way it is a race to the bottom because there is always some board that is understaffed, least financed, in disarray, and if you think applicants don't know about that you just look at the blogs that are on the internet. To say that someone is licensed in Mississippi they should have an automatic license in North Dakota is a tough one. Not because we think we are a super board but because at any point in time there are boards that are struggling. I trust us more than I trust the unknown.

**Representative Keifert:** I was on the study too and it came out that we are 15 addiction counselors short, in DHS we are 45 general counselors short and who department in other areas. We have been told the shortage has been going on for 20 years. So I am wondering how we got this far behind the ball. Do you see anything in your department we could do to help them? All our bills so far were throw money at the education process, but can we streamline that? Anything at all?

**Duane Houdek:** I am not so sure. Although I agree with the study that licensing is a component that should be looked at just as everything else, it is hard for me to come to the conclusion is that the reason we do not have psychiatrists in the Bokken is because of the licensure. I do not think that is it. There are lots and lots of other issues. If you cured

licensing and gave everybody a license in a week I am not sure you would clear the back clog.

**Lacresha Graham:** I am a behavioral health program administrator with the department of human services- the division of mental health and substance abuse. The department supports the bill and anything that we can do to assist with reciprocity and enhancing the behavioral health work force we will be included.

Opposition-

**Reverend Larry J. Giese:** (See Testimony #3)

**Chairman Weize:** How many licensees do you currently have?

**Reverend Larry J. Giese:** We have 41 that are LMST and 13 that are in the associate in the post graduate training.

**Chairman Weize:** Closed the hearing

# 2015 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee  
Fort Union Room, State Capitol

HB 1048  
1/19/2015  
22161

- Subcommittee  
 Conference Committee

*Amanda Muscha*

## Explanation or reason for introduction of bill/resolution:

Relating to state department of health oversight and administration of the development of uniform licensing and reciprocity standards for licensees of the board of addiction counseling examiners.

## Minutes:

Chairman Weisz took up HB 1048. It seems to me that the board of Medical Examiners and the board of Phycologist group probably should be involved in this group.

Rep. Porter: In the past we have had boards come in and talk about reciprocity and that has always been a board function and now we are making it a health council component at a cost of the state of North Dakota when in the past the boards have taken that cost themselves and developed their own rules for reciprocity. I do not know why this has to be done for all the boards on one bill.

Chairman Weisz: Because they were having shortages in these services so they were trying to alleviate. The idea being that if there was a more uniform procedure that it might make it easier for someone coming to the state.

Rep. Damschen: I believe so.

Rep. Fehr: It would make more sense to me that it should be a study going back to the behavioral health group, the interim human services community instead of taking it back to the health council. I also have a bill next week about doing things with their licensing to make it quicker for other state people. Animosity is not reciprocity.

Rep. Mooney: The idea of a study back with the behavioral health group that would make sense but in the mean time we have needs. That is why we thought it would be necessary to go forward with a deliberate manner with the reciprocity. So that all the disciplines could begin when this would come into play to start meeting some of these shortages.

Rep. Fehr: We are talking about the interim so whether it goes to health council, some group that doesn't know this to start over goes back to the behavioral health folks are still

during the interim. I do not see any improvement or time improvement to kick it over to the health council.

Rep. Porter: For the initial certification process for the board of nursing all they do is fill out the application.

Rep. Weisz: Why does the process have to be the same for all the boards?

Rep. Damschen: I do not remember a lot of discussion about why it should be uniform. I think that it would be good to specify that there would be different standards for others. The problem was having a shortage of addiction counselors and trying to expedite the process. Especially the reciprocity issue.

Rep. Hofstad: I was on the committee and the conversation centered on the shortage of addiction counselors and psychiatrists and psychologists. I don't know how we got to the family therapy issue and the medical examiners. There is a real problem with the reciprocity and addiction counselors. This is an overreach and they are going too far.

Rep. Mooney: That was some of the conversation I recall. That was the assumption. I think we heard many times in multiple testimonies that people said it was fine except from people trying to get licensure that it wasn't.

Rep. Fehr: The example I had from psychologists was that I was hearing that there were concerns. They are required to meet twice a year but they are meeting twice a month. Sometimes there is misinformation. I met with the board last August. I was hearing concerns that people are not getting licensed very quickly and the response was that if they are licensed in another state they can come in and practice. The issue wasn't that they couldn't practice, the issue was that if they didn't have a license from this state they couldn't get reimbursed so the board was saying that's not our problem. Perhaps it is thought. Rather than saying it is not their problem they could create a temporary license so that people can get reimbursed. I do not know to what extent that extends to other boards but my point is that looking at an individual board and getting at the real issues are versus what I was hearing is a different story. There are solutions to what their real issues are.

Rep. Oversen: We should consider removing the 30 day requirement if we do have a do pass. I move to amend house bill 1048 to remove starting on line 16, 17, and 18 starting with the plan must include and ending at within 30 days of the application. Just the one sentence.

Rep. Seibel: Second. The 30 days maybe isn't bad if it would say after a completed application.

Chairman Weize: What is completed?

Rep. Dick Anderson: Isn't it when it is submitted to whoever is overseeing it?

Rep. Weisz: Well I think that is where the issue comes in because what they are saying sometimes to do everything in the 30 days is difficult.

Rep. Oversen: I won't make an official motion on that amendment but is possible to so instead, "the plan must include a standard for issuance of a temporary license"? Or they plan may include that? This is just developing the plan it isn't changing any of the requirements.

Chairman Weisz: In the end every one of those boards is going to come before the legislature and say either why they can or can't.

Rep. Rich Becker: I think I understand the 30 days and agree with a couple of the definitions to modify that. I'm confused with from the testimony from yesterday is the young lady who had practiced in Minnesota but can't come here with those practice hours.

Chairman Weisz: That was a bad example.

Rep. Porter: Inside that motion of the amendment and removal, it does not say they have to have a plan. If we want to make a change to this and take the health council out of this and just say that each board should evaluate whether regional, national and international licensing and reciprocity standards are adequate. The fiscal note goes to zero, the whole thing is back on each individual boards, and let them do the work. Let them come back and tell us what they did, and put it back to the interim committee.

Chairman Weisz: Would you want them to come back? You might say in that language there about 30 days?

Rep. Porter: I think so. Leaving the language there is just asking them to look at it and that it isn't law.

Rep. Fehr: I like some of the things Rep. Porter said. The function of the board is to protect the public. We want them to do good work in a timely manner. Take out the 30 days and put together a plan for issuing licenses in a timely manner. We don't want them to try and cut out pieces of the process to make it shorter.

Rep. Damschen: I am considering Representative Oversen and Porter's ideas. In the lines it says qualified applicants. I don't know if the 30 days need to be taken out.

Rep. Oversen: I resend the motion to amend.

Rep. Seibel: Second.

Chairman Weisz: On the face of this it may have hard time. Oversen makes a point, it helps to having the boards talk to each other, but can we do that without having to have 108000? Do you want to define a plan?

Rep. Porter: I move an amendment on line 18 over strike the health council and insert each board shall evaluate and then on line 20 the same thing the boards, and then remove section two, and the rest of the bill.

Rep. Hofstad: Second.

Rep. Porter: Each board will be responsible to discuss together and work together. In my amendment in line 10 then as to include the portion of the century code those already identified parts.

Rep. Oversen: We will have to rewrite the first section 2. Because the way it is written is to develop a plan at that arrest. So we need to show who is developing the plan.

Chairman Weisz: My concern too. The boards need to develop a plan

Rep. Mooney: Going back to the points made earlier, the purpose of the health council being involved was being so that legislative interim period would have an entity that would help pull all of this together. In much of the same way through the behavioral health that we had the sheltie study where they were able to drill down and make all that information to us so that we could do something with it. It seems like to me at any rate that the health council would get straight to that point.

Chairman Weisz: If you read the duties of the health council it seems that it wouldn't really fall under their preview. We would also have to rewrite the language 12, 13, and 14 to reflect that the individual board listed will develop a plan to bring forward.

Rep. Porter: I'll withdraw motion and work with the intern to draw up language.

Rep. Fehr: On line 10, if this becomes a study do we need anything in the century code or can't that just be removed?

Chairman Weisz: All that language will be changed; it will become a study really.

Rep. Porter: It really isn't a study we are mandating each board to do something

Rep. Hofstad: I'll second the motion Rep. Porter made.

Chairman Weize: Closed the hearing

# 2015 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee  
Fort Union Room, State Capitol

HB 1048  
1/20/2015  
22249

- Subcommittee  
 Conference Committee

Committee Clerk Signature



## Explanation or reason for introduction of bill/resolution:

A bill for an Act to provide for behavioral health licensure boards to each develop a plan, in collaboration with the other boards, for the administration and implementation of uniform licensing and reciprocity standards for licensees.

## Minutes:

Handout #1

**Chairman Weisz:** took up HB 1048 and handed out amendments. (See handout #1)  
After the comma on line 14, it seems to imply that the boards are supposed to develop a plan together. I think it has to be their respective boards that develop a plan.

**Rep. Porter:** That is the way that Austin had drafted it. After the Committee it was my understanding that they were to collaborate and come up with a plan.

**Rep. Fehr:** Talked with the president of the psychology board about the previous version of the bill. It was a very emphatic response to work together with the other boards, provided the funding was there.

**Rep. Porter:** This does put the expense back on the board.

**Chairman Weisz:** If many on the board do not feel one size does fit all, who is responsible to develop the plan? I thought we wanted them to collaborate and have each board develop a policy to bring forward.

**Rep. Porter:** If it works right it will be part of the responsibility of the interim health committee to track it.

**Chairman Weisz:** On line 20 it says that each board shall present its findings on the proposed plans.

**Rep. Muscha:** You literally don't have to travel anymore to see and hear everybody. I don't see why the boards can't collaborate.

**Rep. Seibel:** I like the idea of collaboration, but I don't think there is a one size fits all.

**Rep. Rich Becker:** Most of the meetings could be done via conference. Aren't most of the boards in Bismarck anyway? You have to have a leader, someone who can coordinate and organize... Do we have the authority to name someone?

**Rep. Mooney:** Going back to the original bill, that's how the council got named. The intent was to have someone be the overall driver.

**Rep. Damschen:** If you change the name of the State Board of Medical Examiners, This language will be wrong.

**Chairman Weisz:** If we don't want to put an agency in charge, we are asking them to collaborate.

**Rep. Hofstad:** I'm afraid if we name somebody, then the fiscal note goes along with that name and the bill has no effect. I agree with Rep. Porter.

**Rep. Fehr:** Is that something the Interim Committee could designate to the chair or something?

**Chairman Weisz:** That might be a stretch.

**Rep. Porter:** The boards are all independent of each other. There are some issues with licensing, reciprocity and standards inside of each board but contribute to the overall problem of getting more providers in the state. The boards will have to work in collaboration.

**Chairman Weisz:** In the end each board will have to cooperate with each other.

**Rep. Damschen:** I don't think the feeling was that we needed one process to cover all on the interim committee.

**Chairman Weisz:** Are you comfortable with the language as it is?

**Rep. Seibel:** I can live with it, but if we can leave the words "uniform licensing" in there then we are telling them that their plans have to be identical.

**Rep. Mooney:** Just changing the word so that it is a coordinated effort was our goal.

**Chairman Weisz:** I would just leave the word out.

**Rep. Fehr:** I agree to leave the words from licensing out. I need to point out that the word reciprocity is not included.

**Chairman Weisz:** I think the board will understand what the reference is to reciprocity & what to come forward with.

**Rep. Damschen:** If it just said implementation of licensing standards, wouldn't the standards be part of whether they accept other states image?

**Rep. Fehr:** I really think the following sentence clarifies that.

**Chairman Weisz:** K, so then we would just eliminate the reciprocity part on line 19?

**Rep. Mooney:** It seems like that sentence should stand alone and take care of it. I am still concerned about the reciprocity of North Dakota accepting other states.

**Chairman Weisz:** My suggestion is to leave it in.

**Rep. Porter:** As long as we say what our definition of reciprocity is at the time we go through with this. Our concern is with the standards of education and licensure from other states.

**Chairman Weisz:** Proposed amendment in front of us.

**Rep. Porter:** Motion amendment

**Rep. Seibel:** Second

**Rep. Oversen:** I won't be supporting the amendment, because of the fiscal cut. It won't be successful on the other side.

**Chairman Weisz:** You are right that it doesn't have teeth from that administrative stand point.

**Rep Damschen:** I thought it had a little bite with the part two and having to present it to the legislative management.

**Rep Fehr:** I am fine with the motion as it is, but we haven't addressed the leadership part of the bill.

**Chairman Weisz:** I guess that we shouldn't have to spell out every part of the bill. How the boards work it out doesn't matter to me.

**Rep Fehr:** Would they be reporting to an interim committee?

**Chairman Weisz:** Exactly.

**Rep Oversen:** I want to clarify that I didn't believe the amendment doesn't have teeth to it, it just won't be as effective without proper administrative support.

**Voice Vote:** Yeas have it.

**Chairman Weisz:** I think we need an amendment to delete all the sections that are no longer necessary.

**Rep Mooney:** Makes Motion

**Rep Fehr:** Seconds the Motion

**Voice Vote:** Yea's have it

**Rep Hofstad:** I move a do pass on HB 1048 as amended.

**Rep Mooney:** Seconds the Motion

**Rep Seibel:** Will the word uniform automatically be changed on line 4?

**Chairman Weisz:** That is correct.

**Rep Damschen:** Do we need to say anything about the State Board of Medical Examiners?

**Chairman Weisz:** The code reviser does that, my understanding is that when the name is changed, it changes everywhere in the code. A code reviser should take care of it.

**A Roll Call vote was taken: Yes 13, No 0, Absent 0.**

**Do Pass as Amended carries.**

**Rep: Fehr Carries the bill**

2 A BILL for an Act to provide for behavioral health licensure boards to each  
3 develop a plan, in collaboration with the other boards, for the administration and  
4 implementation of uniform licensing and reciprocity standards for licensees.

5 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

6 **SECTION 1. BEHAVIORAL HEALTH LICENSURE BOARDS - PLAN**  
7 **FOR ADMINISTRATION AND IMPLEMENTATION OF UNIFORM LICENSING**  
8 **AND RECIPROCITY STANDARDS FOR LICENSEES - REPORT TO**  
9 **LEGISLATIVE MANAGEMENT.**

- 10 1. During the 2015-16 interim, the board of addiction counseling examiners,  
11 board of counselor examiners, North Dakota board of social work  
12 examiners, state board of psychologist examiners, state board of medical  
13 examiners, and North Dakota marriage and family therapy licensure board,  
14 shall, in collaboration with the other boards, develop a plan for the  
15 administration and implementation of uniform licensing and reciprocity  
16 standards for licensees. The plan must include a standard for issuance of  
17 licenses to qualified applicants in a timely manner. The boards shall  
18 evaluate whether regional, national, and international licensing and  
19 reciprocity standards are adequate for licensure in the state.
- 20 2. Before July 1, 2016, each board shall present its findings, the proposed  
21 plan, and any legislative changes necessary to implement the plan, to  
22 legislative management.

8/1-21-15

January 20, 2015

**PROPOSED AMENDMENTS TO HOUSE BILL NO. 1048**

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to provide for behavioral health licensure boards to each develop a plan, in collaboration with the other boards, for the administration and implementation of licensing and reciprocity standards for licensees.

**BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

**SECTION 1. BEHAVIORAL HEALTH LICENSURE BOARDS - PLAN FOR ADMINISTRATION AND IMPLEMENTATION OF LICENSING AND RECIPROCIITY STANDARDS FOR LICENSEES - REPORT TO LEGISLATIVE MANAGEMENT.**

1. During the 2015-16 interim, the board of addiction counseling examiners, board of counselor examiners, North Dakota board of social work examiners, state board of psychologist examiners, state board of medical examiners, and North Dakota marriage and family therapy licensure board, shall, in collaboration with the other boards, develop a plan for the administration and implementation of licensing and reciprocity standards for licensees. The plan must include a standard for issuance of licenses to qualified applicants in a timely manner. The boards shall evaluate whether regional, national, or international licensing and reciprocity standards are adequate for licensure in the state.
2. Before July 1, 2016, each board shall present its findings, the proposed plan, and any legislative changes necessary to implement the plan, to the legislative management."

Renumber accordingly

Date: 1-20-15  
Roll Call Vote #: 1

2015 HOUSE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 1048

House Human Services Committee

Subcommittee

Amendment LC# or Description: Proposed attached amendment as handout

Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar

Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Rep. Porter Seconded By Rep. Seibel

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz			Rep. Mooney		
Vice-Chair Hofstad			Rep. Muscha		
Rep. Bert Anderson			Rep. Oversen		
Rep. Dick Anderson					
Rep. Rich S. Becker					
Rep. Damschen					
Rep. Fehr					
Rep. Kiefert					
Rep. Porter					
Rep. Seibel					

Total (Yes) \_\_\_\_\_ No \_\_\_\_\_

Absent \_\_\_\_\_

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Voice vote  
yeas have it

Date: 1-20-15  
Roll Call Vote #: 2

2015 HOUSE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 1048

House Human Services Committee

Subcommittee

Amendment LC# or Description: \_\_\_\_\_

- Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar
- Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Rep. Mooney Seconded By Rep. Fehr

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz			Rep. Mooney		
Vice-Chair Hofstad			Rep. Muscha		
Rep. Bert Anderson			Rep. Oversen		
Rep. Dick Anderson					
Rep. Rich S. Becker					
Rep. Damschen					
Rep. Fehr					
Rep. Kiefert					
Rep. Porter					
Rep. Seibel					

Total (Yes) \_\_\_\_\_ No \_\_\_\_\_

Absent \_\_\_\_\_

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Delete all sections not necessary.    Voice votes  
yeas have it

Date: 1-20-15  
 Roll Call Vote #: 3

**2015 HOUSE STANDING COMMITTEE  
 ROLL CALL VOTES  
 BILL/RESOLUTION NO. 1048**

House Human Services Committee

Subcommittee

Amendment LC# or Description: 15.0231.02001

Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar  
 Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Rep. Hofstad Seconded By Rep. Mooney

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz	✓		Rep. Mooney	✓	
Vice-Chair Hofstad	✓		Rep. Muscha	✓	
Rep. Bert Anderson	✓		Rep. Oversen	✓	
Rep. Dick Anderson	✓				
Rep. Rich S. Becker	✓				
Rep. Damschen	✓				
Rep. Fehr	✓				
Rep. Kiefert	✓				
Rep. Porter	✓				
Rep. Seibel	✓				

Total (Yes) 13 No 0

Absent 0

Floor Assignment Fehr

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**HB 1048: Human Services Committee (Rep. Weisz, Chairman)** recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (13 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1048 was placed on the Sixth order on the calendar.

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to provide for behavioral health licensure boards to each develop a plan, in collaboration with the other boards, for the administration and implementation of licensing and reciprocity standards for licensees.

**BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

**SECTION 1. BEHAVIORAL HEALTH LICENSURE BOARDS - PLAN FOR ADMINISTRATION AND IMPLEMENTATION OF LICENSING AND RECIPROCITY STANDARDS FOR LICENSEES - REPORT TO LEGISLATIVE MANAGEMENT.**

1. During the 2015-16 interim, the board of addiction counseling examiners, board of counselor examiners, North Dakota board of social work examiners, state board of psychologist examiners, state board of medical examiners, and North Dakota marriage and family therapy licensure board, shall, in collaboration with the other boards, develop a plan for the administration and implementation of licensing and reciprocity standards for licensees. The plan must include a standard for issuance of licenses to qualified applicants in a timely manner. The boards shall evaluate whether regional, national, or international licensing and reciprocity standards are adequate for licensure in the state.
2. Before July 1, 2016, each board shall present its findings, the proposed plan, and any legislative changes necessary to implement the plan, to the legislative management."

Renumber accordingly

**2015 SENATE HUMAN SERVICES**

**HB 1048**

# 2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee  
Red River Room, State Capitol

HB 1048  
2/18/2015  
24057

- Subcommittee  
 Conference Committee

Committee Clerk Signature

*Donald Mueller*

## Explanation or reason for introduction of bill/resolution:

A bill to provide for behavioral health licensure boards to each develop a plan, in collaboration with other boards, for the administration and implementation of licensing and reciprocity standards for licensees.

## Minutes:

Attach #1: Electronic Testimony by Rev. Larry Giese  
Attach #2: Testimony by Duane Houdek

**Alex Cronquist**, Legislative Council, introduced HB 1048, and stated the bill came out of the Human Services Interim Committee. Mr. Cronquist read the bill. (1:50)

**Chairman Judy Lee** distributed electronic written testimony by **Rev. Larry Giese** (attach #1).

**Senator Dever** questioned what the House did with this bill since this is the 03000 version.

**Mr. Cronquist** indicated that originally the onerous was on the Department of Health to coordinate getting the Boards together and come up with a consolidated plan.

**Senator Dever** continued that apparently there was a fiscal impact.

**Mr. Cronquist** indicated that was when it was with the Department of Health and it no longer needs funds from state general fund. Mr. Cronquist was unclear what the prior fiscal note was.

**Chairman Judy Lee** provided background, with the discussion that the Schulte report identified a lot of silos and few bridges between them. The recommendation was that there be some discussion about how these various professions, all of whom are different, some basic qualifications and curriculum required for each of them that ought to be more interactive. The intent is to see if there is some way the curriculum and experience of the students can be looked at in a broader sense. In behavioral health, there is a shortage of addiction counselors, so one thing to look at is if there is a way to see if they can move up and over into the new career in a way that isn't quite so costly. Chairman Judy Lee voiced her support for this plan.

**Rod St. Aubyn**, representing Stakeholder Groups for Behavioral Health. The stakeholders group evolved and started with bipartisan group. The original group who started the process, Sen Lee, Mathern, Rep Hogan, Silbernagle, and other members, with the intent that we have major behavioral health issues, with focus on access. We have stakeholders across the state, schools, providers, Department of Human Services, governor's office, law enforcement, Department of Corrections, all who are involved with stakeholder group of over 400 people. We were assisting the Department of Human Services committee review the behavioral health issues. Renee Schulte was hired as consultant, and we provided support to her. As a result, the stakeholders identified specific needs. With the issue of access, there were numerous Boards with different ways of credentialing and licensing new professionals or people coming from other states. One of the recommendations was that they must include a standard issuance of licenses to qualified applicants within 30 days of application. There was a lot of pushback on this as it may have been too aggressive because some of the boards only meet on a quarterly time line. The intent of the bill is to look at the licensing process for some of these professionals and see if there are improvements that can be identified so we can get more professionals practicing and dealing with behavioral health issues, especially in access of services.

**Senator Warner** commented that we have always worked within the state system for descriptions of coursework across the state universities. But as you get into more elevated courses, it becomes more difficult to create exact analogies between courses. For example, if you take a course on therapy at the University of North Dakota, does it match the coursework for the University of Minnesota. The continuing education is usually done through seminars and certificates rather than academic degrees. Is there some overall global regional authority that coordinates those course offerings and certificate programs so they are roughly equivalent?

**Mr. St. Aubyn** was not aware that there is but can't answer.

**V. Chairman Oley Larsen** offered where that comes into play is an accredited facility. These come through the Northwest Regional Accreditation for it to count. So if you take online course in Arizona and it is accredited under the northwest region, then it will count.

**Chairman Judy Lee** stated the group who worked on this doesn't expect the courses to be identical. They look to see if there are comparable courses, with some equivalency. Licensed Marriage and Family Therapists curriculum has changed, for example.

**Senator Dever** noted that it appears that there are six independent boards to work collaboratively. How does that work.

**Chairman Judy Lee** stated the House removed the Department of Health as the lead, so assumes the Boards would have to collaborate together without that lead.

**Senator Axness** answered an earlier question regarding the original fiscal note. There was originally \$108,900 in which the Department of Health would contract with an outside vendor to complete the evaluation and study of the six program standards. It would have required 20% of an FTE from the Department of Health at about \$28,000. The original

intent is that person would get everyone together. The remaining \$80,000 was for a vendor.

**Chairman Judy Lee** indicated that Renee Schulte would probably do it less, and thought it was a generous amount for the consultant.

**Mr. St. Aubyn** in the revised bill, the important part of all of this is that the plan must include a standard for issuance of license for applicants in a timely manner. We want these professionals in the field of behavioral health to be in North Dakota; there are significant needs. We urge the boards to come up with a plan and process to get these practitioners providing services sooner.

OPPOSITION TO HB 1048

No opposing testimony

NEUTRAL TO HB 1048

**Duane Houdek**, representing the State Board of Medical Examiners, testified NEUTRAL to HB 1048. (attach #2) (16:54-20:38)

**Chairman Judy Lee** agreed that the example of some of the local license is exactly what some of the other boards need to review, because they don't all have a full time director, and one of the complaints heard in the interim was that people may wait many months to get licensed and frustrations where someone went out of state to work. There is a big difference between one Board to the next - we can't wait for a quarterly meeting.

**Senator Howard Anderson, Jr.** stated he is supportive of getting the Boards together and we do that very seldom. It gives them an opportunity what Mr. Houdek talked about - issues aren't always as simple as they appear. He gave an example in the Board of Pharmacy. This will help what everyone sees.

**Senator Axness** noted this bill has six Boards, and we've heard from two, one in support and Mr. Houdek's neutral. Are there issues to get the Boards together? Should it be back at the Department of Health.

**Mr. Houdek** indicated they would be willing to convene the meetings and coordinate. He hesitates to take responsibility to take on the bill. He knows of no resistance.

**Chairman Judy Lee** indicated we need a lead investigator who actually invites people to the table, and then a chairman can be selected by the group.

**Mr. Houdek** agrees and would be happy to start that.

**Chairman Judy Lee** agreed with Mr. Houdek reciprocity concern about different standards and qualifications, and agrees we do not want to dilute our quality.

Closed Public Hearing

**Senator Warner** voiced his concern that there is no lead agency. The relationships between Boards may look like big brother. **Chairman Judy Lee** suggested that an email be sent to the other Boards and ask for their comments.

**Senator Axness** indicated that four of the six didn't have a comment, and wonders if they know about this bill. **Chairman Judy Lee** stated that is there responsibility to watch this bill.

**Chairman Judy Lee** will consider on Monday.

# 2015 SENATE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Red River Room, State Capitol

HB 1048  
3/10/2015  
24619

- Subcommittee  
 Conference Committee

Committee Clerk Signature



## Explanation or reason for introduction of bill/resolution:

A bill to provide for behavioral health licensure boards to each develop a plan, in collaboration with other boards, for the administration and implementation of licensing and reciprocity standards for licensees.

## Minutes:

No attachments

These are minutes from the Senate Human Services Committee work on March 10, 2015 at 3:35 p.m.

**Chairman Judy Lee** recapped HB 1048.

**Senator Warner** moved the Senate Human Services Committee recommend a DO PASS of HB 1048. The motion was seconded by **Senator Howard Anderson, Jr.**

## Roll Call Vote

6 Yes, 0 No, 0 Absent

**Senator Warner** will carry HB 1048 to the floor.

**2015 SENATE STANDING COMMITTEE  
 ROLL CALL VOTES**  
 BILL/RESOLUTION NO. HB1048

Senate Human Services Committee

Subcommittee

Amendment LC# or Description: \_\_\_\_\_

Recommendation:  Adopt Amendment  
 Do Pass  Do Not Pass  Without Committee Recommendation  
 As Amended  Rerefer to Appropriations  
 Place on Consent Calendar  
 Other Actions:  Reconsider  \_\_\_\_\_

Motion Made By Sen. Warner Seconded By Sen Anderson

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee (Chairman)	✓		Senator Tyler Axness	✓	
Senator Oley Larsen (V-Chair)	✓		Senator John M. Warner	✓	
Senator Howard C. Anderson, Jr.	✓				
Senator Dick Dever	✓				

Total (Yes) 6 No 0

Absent 0

Floor Assignment Sen. Warner

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**HB 1048, as engrossed: Human Services Committee (Sen. J. Lee, Chairman)**  
recommends **DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING).  
Engrossed HB 1048 was placed on the Fourteenth order on the calendar.

**2015 TESTIMONY**

**HB 1048**

## Human Services Testimony HB1048

January 14, 2015

Pete Silbernagel

Mr. Chairman and members of the Human Services Committee, for the record my name is Pete Silbernagel, Rep. from District 22 and I live in Casselton, N.D. I am here today to speak in support of HB1048.

HB1048 establishes an oversight system dealing with reciprocity issues for behavioral health licensing boards. It would require the Department of Health to develop and implement a plan during the 2015-16 interim to provide uniform licensing and reciprocity standards for the boards of addiction counseling examiners, counselor examiners, social worker examiners, psychologist examiners and marriage and family therapist licensure boards.

The Schulte Report that was conducted during the interim recognized Expanding the Behavioral Health Workforce as one of the key strategies that our state needs to embrace to effectively address what has been described in the Schulte report as a "mental health and substance abuse system that is in crisis". There were four bills that resulted from the Schulte effort and the supporting stakeholder's group that deal with expanding the workforce. Those bills include HB1040, HB1049, SB2049 and HB1048.

One of the goals put forward by both Schulte and the stakeholder's group is to address the licensure issues and concerns that exist. To quote the Schulte report, "An important area to address is the individual licensing boards operating in the state of North Dakota. These boards have not standardized their requirements; education experience and internship expectations, reciprocity, etc., making every license unique and challenging to obtain, in various ways. Some boards require face-to-face meetings to approve licensure but only meet a couple of times a year. Providers have a difficult time even contacting the board with questions. Without options for provisional license status, providers cannot bill or be paid equitably while waiting for a board to meet. Not being able to be fully

reimbursed for six or more months proves to be a significant deterrent to those who may be interested in relocating to North Dakota. Other licenses like the Licensed Addiction Counselors (LAC) require a set of educational courses that are above national accreditation standards and are not even available in the state. The LAC requires a large unpaid internship to complete that cannot be counted concurrently with other mental health licenses like the Licensed Professional Counselor (LPC) and doctorate level psychologist. Although the century code states that the LAC board may grant reciprocity the reciprocity is difficult to impossible according to many who have been licensed in other states trying to relocate in North Dakota. With the extreme shortage of workforce in behavioral health areas, especially LAC's, this issue must be addressed quickly".

During the past year as I participated as a stakeholder steering committee I attended numerous meetings and group teleconference calls that confirms that there were numerous issues related to licensure requirements, process and reciprocity that surfaced. Frankly, many of the issues are very complex, detailed and not easily understood and will require significant time and attention to better understand what the facts are and to come up with solutions to address the issues. An effort to better understand the issues with appropriate recommendations is much needed.

In summary, I would ask that you support HB1048; I consider this bill to be some of the "low hanging" fruit to help build our behavioral health workforce in our state.

**HOUSE HUMAN SERVICES COMMITTEE**

**HOUSE BILL NO. 1048**

**January 14, 2015**

Testimony of Duane Houdek  
State Board of Medical Examiners

Chairman Weisz, members of the committee, my name is Duane Houdek. I am the executive secretary of the Board of Medical Examiners and speak on their behalf.

The board has taken a neutral position on this bill. We certainly do not disagree with the effort to look at the state's medical licensing practices, among others, and will be happy to fully participate in the plan this legislation establishes. We have been examining an interstate compact ourselves through the Federation of State Medical Boards and, at our last meeting in November, the board expressed an interest in the compact, but reserved a determination to join until the costs of joining and participation were made known.

We do want to raise a couple of issues, however, that make the 30 day deadline imposed by this bill difficult to meet, and one issue that we believe merits consideration and weighs against such a deadline.

First, in North Dakota, legislation requires us to perform criminal background checks. As you will recall, this type of legislation was passed for many professions following the tragedy a few years ago at one of our state institutions where a background check probably would have prevented a hire at one of our state's universities. If everything goes right, these background checks can be completed in two weeks, but if prints are rejected by the FBI, it will often take more than 30 days to complete the background check. The question then would become whether it is worth the slight increase in speed of a license to omit that step. We don't discover major crimes through that background check, but we often find out about crimes involving alcohol or substance abuse, and they form a basis for further evaluation by institutions we trust to make sure we are not licensing an individual who is impaired.

Secondly, 40 to 50% of the physicians who apply in North Dakota use the FCVS, which is a credentialing process run by the Federation of State Medical Boards and used by many

physicians. Physicians like it because they use the same packet across the nation. We have no control over the speed of that process. I asked to get current information about the time it takes for FCVS to gather their information and they said they complete 65% of their applications in less than 60 days. The chances of them completing 100% of their applications in less than 30 days is zero.

Finally, I assume this bill is being driven by the desire to get medical providers into the state's areas of need, especially those practicing behavioral health. But it should be understood that roughly half of the physicians we license – 1830 of 3700 – do not have a practice location in North Dakota. Many of them practice telemedicine on North Dakota citizens from other states or even other countries. This means there is no local bricks and mortar institution that regulates or credentials their practice. In that context, I think it would be reckless to put a premium of speed over thoroughness of vetting during the licensure process. Legally, it is much more difficult to take a license away than it is to deny one initially.

Thank you. I would be happy to try to answer any questions you may have.

Testimony HB 1048 House Human Services Committee (AGAINST/OPPOSING)  
Wednesday, January 14, 2015, 9:00 AM

Rev. Larry J. Giese  
3910 Lewis Road NW  
Mandan, ND 58554, District #31, 701-400-8943

TO: Rep. Robin Weisz, Chair, Rep. Curt Hofstad, Vice-Chair, Rep. Bert Anderson, Rep. Dick Anderson, Rep. Rich Becker, Rep. Chuck Damschen, Rep. Alan Fehr, Rep. Dwight Kiefert, Rep. Gail Mooney, Rep. Naomi Muscha, Rep. Kylie Oversen, Rep. Todd Porter, Rep. Jay Seibel

I am Rev. Larry Giese. I have served on the North Dakota Marriage and Family Therapy Licensure Board (NDMFTLB) since the licensing bill passed the Legislative Assembly in 2005. I was appointed to the Board in 2006. I have served as Board President for the past four years. My appointed term has expired and now I serve as Board Administrator.

I stand in opposition of HB 1048 as it is written. In Section 1 subsection 6 to section 23-01-03 of the NDCC, page 1 of HB 1048 lines 16-18 reads, **“The plan must include a standard for issuance of licenses to qualified applicants within 30 days of application.”** This language is what I am opposed to for these reasons:

1. Although the North Dakota Marriage and Family Therapy Licensure Board has in place reciprocity, in our terms “endorsement,” standards the timing of 30 days is impossible. Title 111-02-03-06. Most applications arrive by mail incomplete. What is received in the first mailing is the Application form and endorsement fee.
2. Additional support documentation includes:
  - a. An original transcript from the university of study. It is preferred for license applicants to have graduated from the nationally recognized accreditation of the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) or the Council for Accreditation of Counseling and Related Educational Programs (CACREP). Otherwise an Educational Equivalency must be filed. A copy of the licensing standards in the previous jurisdiction must be sent to the North Dakota Marriage and Family Therapy Licensure Board, (LMFTLB) to determine if licensing standards equal or exceed North Dakota standards for education and supervision. (sent separate from the university to NDMFTLB. Can take 2 weeks).
  - b. Verification from the previous Licensing jurisdiction that in fact the applicant has a valid license in good standing. This statement must include practicum and post-graduate supervision and experience hours to be compared with North Dakota Standards, 300 hours of individual and group supervision and 2,000 of direct client contact experience in the delivery of individual, couple, and family therapy. (does not accompany the application, sent from the previous licensing jurisdiction. Can take 3-4 weeks to arrive)

- c. Verification that they have written and passed the national marriage and family therapy exam administered by the Association of Marriage and Family Therapy Regulatory Board. (can accompany the application)
- d. Three letters of professional recommendation, usually from former supervisors of work performance, ethics, and knowledge of any criminal or traffic violations (DUI is serious!) (separate cover)
- e. Federal and state Background Check. (separate cover, 7-10 days)
- f. Pass the oral interview exam conducted by the NDMFTLB. This is arranged with the applicant once NDMFTLB has approved the application. (takes from 3-8 weeks depending upon when the next scheduled Board meeting.)

As a former member of the Board I can attest with some research that the fastest these items could be accrued to complete a file by a licensee was in 56 days, Minnesota licensee, another in 62 days, Wisconsin. One took over 90 days, Nevada. These applicants were in constant contact with the Board as to which forms needed to be provided and what supportive documents were necessary. Not all applicants are this proactive. The time it takes for some jurisdictions to document licensee information and send it to us can take all of three weeks.

I would suggest that the House Human Services Committee consider an amendment to the Bill which would amend "30" days to "90" days of application or language, "30 days after the approval of the application. 30 days of action is like asking an old guy like me to stand on my head. I cannot do that anymore!

Furthermore, I believe to provide some uniform licensing criterion may be difficult as licenses for the various boards have evolved over time documenting a diverse protocol of education and experience.

Thank you for this opportunity to bring this testimony before the Human Services Committee today. For any questions please contact me.

#1 handout  
1-20-15  
HB 1048

Proposed Amendments to HB 1048

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22

A BILL for an Act to provide for behavioral health licensure boards to each develop a plan, in collaboration with the other boards, for the administration and implementation of uniform licensing and reciprocity standards for licensees.

**BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

**SECTION 1. BEHAVIORAL HEALTH LICENSURE BOARDS - PLAN FOR ADMINISTRATION AND IMPLEMENTATION OF UNIFORM LICENSING AND RECIPROCITY STANDARDS FOR LICENSEES - REPORT TO LEGISLATIVE MANAGEMENT.**

1. During the 2015-16 interim, the board of addiction counseling examiners, board of counselor examiners, North Dakota board of social work examiners, state board of psychologist examiners, state board of medical examiners, and North Dakota marriage and family therapy licensure board, shall, in collaboration with the other boards, develop a plan for the administration and implementation of uniform licensing and reciprocity standards for licensees. The plan must include a standard for issuance of licenses to qualified applicants in a timely manner. The boards shall evaluate whether regional, national, and international licensing and reciprocity standards are adequate for licensure in the state.
2. Before July 1, 2016, each board shall present its findings, the proposed plan, and any legislative changes necessary to implement the plan, to legislative management.

Testimony HB 1048 Senate Human Services Committee  
Wednesday, February 18, 2015, 9:30 AM

Rev. Larry J. Giese  
3910 Lewis Road NW  
Mandan, ND 58554, District #31, 701-400-8943

Attach #1  
HB 1048  
02/18/2015  
J# 24057

GIESE

TO: Senator Judy Lee, Chair, Senators Oley Larsen, Senator Howard C. Anderson, Jr., Senator Tyler Axness, Senator Dick Dever, Senator John Warner

I am Rev. Larry Giese. I have served on the North Dakota Marriage and Family Therapy Licensure Board (NDMFTLB) since the licensing bill passed the Legislative Assembly in 2005. I was appointed to the Board in 2006. I have served as Board President for the past four years. My appointed term has expired and now I serve as Board Administrator.

I stand in support HB 1048 as it is amended and presented to you. As originally proposed this bill was constricting. I had proposed an amendment to the original bill which was amended. Apparently, this bill was amended and adopted.

Please accept and adopt engrossed bill HB 1048. The Marriage and Family Therapy Licensure Board will work to the goals stated in the bill as now presented.

SENATE HUMAN SERVICES COMMITTEE

HOUSE BILL NO. 1048

February 18, 2015

Testimony of Duane Houdek  
North Dakota State Board of Medical Examiners

Attach #2  
HB 1048  
02/18/2015  
J# 24057

Madam Chair, members of the Senate Human Services Committee, my name is Duane Houdek. I represent the State Board of Medical Examiners. Our board has taken a neutral position on this bill.

We are fully supportive of any study of licensing practices that could safely increase the speed of licensing medical professionals in the state, and will work with the other boards in the interim to report the findings of that study.

We had some concerns with the bill, as drafted, but those were all taken care of in the House, and we have no concern with the bill, as amended.

For your information, in the medical licensing field, there is an interstate compact the nation's medical boards have drafted, the legislation for which has been introduced in over fifteen states. Our board has participated in this discussion, has examined the compact and has indicated an interest in supporting it for North Dakota, but wants to reserve its determination until the costs of joining and participation are known.

Thank you. I would be glad to try to answer any questions you may have of me.