Overview of SB 44

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On behalf of the Rural Regional Behavioral Health Policy Board

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Goals for Today:

- Background and bill purpose
- Brief overview of current posted language for SB 44
- Present current amendment mock-up
- Discussion/Q&A

The Problem

- We have too few licensed behavioral health professionals in Nevada to meet pre-COVID needs
- In the past, has taken several months to years for seasoned professionals from out-of-state to gain Nevada licensure
- The need for care (substance misuse, mental illness, and co-occurring) has increased during COVID
- Increased needs may last long beyond the "end" of COVID

Rural Regional Behavioral Health Policy Board's Goal with SB 44

To alter language in NRS to streamline paths to Nevada Licensure for the purposes of increasing the number of qualified behavioral health providers in the state.

How can we keep positive affects of Directive 011 in place long-term?

How can we help increase the number of providers available to Nevadans?

Behavioral Health Licensing Boards Affected

- Board of Psychological Examiners (NRS 641)
- Board of Examiners for Marriage and Family Therapists & Clinical Professional Counselors (NRS 641A)
- Board of Examiners for Social Workers (NRS 641B)
- Board of Examiners for Alcohol, Drug, and Gambling Counselors (NRS 641C)



Basic Components as Currently Posted to NELIS Addition of Licensed Master of Social Work (LMSW) licensure type for Board of Social Work

Provisional licensure to be granted pending official transcript receipt (with submission of unofficial transcripts)

Interim study by LCB/Interim Committee on Health Care to evaluate licensing board processes for unnecessary barriers and efficiency, including additional reports to Regional Behavioral Health Boards

Issues with Current Language:

- No immediate changes to licensure processes
- Official transcripts have only been an issue related to college closures or school closures related to COVID – Fingerprinting/background checks are a larger issue.
- Still issues with interns being able to find appropriate supervisors to complete practice hours/become licensed.

Remove

 Interim study on the efficiency and effectiveness of BH licensing board processes for licensure

Why?

Creates no immediate change

Add

- Revisions of language regarding licensure by endorsement for all four BH licensing boards.
- Annual reports from licensing boards must be submitted to Chairs of Regional Behavioral Health Policy Boards

Why?

 Accomplishes goals, closely matches feedback from stakeholders, reputable example, creates immediate change



Remove

 Language regarding unofficial transcript submission for provisional licensure

Why?

- Stakeholders felt transcript submission wasn't the major holdup.
- The issue surrounding official transcript submission is more related to permanent school closure and/or absorption into other institutions.

Change

- This language to reflect provisional licensure pending fingerprinting results.
- Provisional license can be granted for any reason.
- Add provisions for official transcript submission when college/university has closed or absorbed.

- Allows for professionals to begin practice more quickly
- Allows for official transcript submission when college/institution has closed/been absorbed.

Change

- Language regarding NRS from "may" to "shall" grant licensure by endorsement
- Language regarding licensure by endorsement to mandate granting of licensure unless denied for good cause.

Why?

 Adds teeth and removes some grey area surrounding grounds for licensure.

Add

 Codifying in NRS that remote supervision options must be provided for interns.

- Removes major barrier for many rural residents who wish to become licensed providers.
- Provides more options for students who want to work with certain populations
- Available part-time from SW Board, full-time from MFT/CPC Board, and has been discussed by Alcohol and Drug Board. All in NAC, not NRS.

Change

• Members of the Armed Forces, Veterans, Spouses, and Surviving Spouses will only be required to pay ½ of regular application fee.

- Removes possible barrier for those who have served and their spouses.
- Ensures that all four behavioral health licensing boards provide this option.

Change

 Combining of language in NRS regarding general population applicants for licensure by endorsement and those received from service members, veterans, and their spouses/surviving spouses.

Why?

• Cleans up language; most provisions are now too similar to require separate language.

Add

 Affected licensing boards are required to list crimes which would disqualify applicants for licensure in NAC.

- Clarifies requirements before an applicant goes to the trouble of completing/submitting requirements for licensure.
- Listing crimes in NAC provides more flexibility to update crimes listed as laws themselves change, if necessary.

How SB 44 Will Read Before and After Proposed Amendment

Original Components of SB 44

Interim study of licensing boards' processes

Provisional licensure pending official transcript submission

Addition of LMSW licensure type



Components of SB 44 After Proposed Amendment

Revised
licensure by
endorsement
language,
processes and
requirements

Provisional licensure pending background check results

Alternative means of official transcript submission

Codifying remote supervision options for interns

Reduced licensure
by endorsement
fees for service
members,
veterans,
spouses/surviving
spouses

Improved communication of disqualifying crimes for licensure

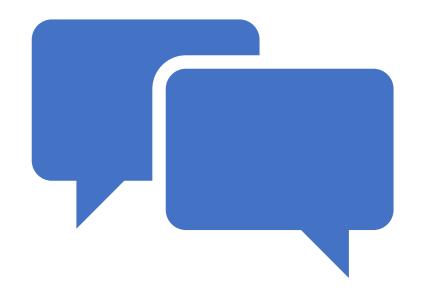
Addition of LMSW licensure type

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Questions and Discussion